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National Highway Traffic Safety Administration

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*** *** ***



TRANSPORTATION RESEARCH CENTER

Indiana University Bloomington, Indiana 47403-1599

ON-SITE AIR BAG INVESTIGATION

CASE NO. - 96-20 FLEET - PRIVATE VEHICLE LOCATION -ACCIDENT DATE - 1996

Submitted By:

Senior Staff Associate and

Associate Scientist

1997

Revised Submission:

2001

Contract Number: DTNH22-94-D-17058

Prepared for:

U.S. Department of Transportation
National Highway Traffic Safety Administration
National Center for Statistics and Analysis
Washington, D.C. 20590-0003

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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points be coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

Technical	Report	Documentation	Page
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On-site air bag deployment investigation involving a 1996 Chevrolet Cavalier, two-door coupe, with manual belts and dual front air bags

16. Abstract

This report covers an on-site investigation of an air bag deployment crash that involved a 1996 Chevrolet Cavalier which ran-off-road and impacted a culvert. This crash is of special interest because the Cavalier's right front passenger (5 year-old female) sustained fatal head injuries, allegedly from her deploying right front air bag. The Cavalier was traveling southeast in the southeast lane of a two-lane, undivided, state roadway when it veered off the roadway to the right. The Cavalier traveled approximately 29 meters (95 feet) along a drainage ditch prior to impacting the culvert. The front bumper and undercarriage of the Cavalier (case vehicle) impacted the culvert causing the case vehicle's driver side and right front passenger side supplemental restraints (air bags) to deploy. The case vehicle came to an a abrupt stop after impact and was heading southeast at final rest. The case vehicle's driver (17 year-old female) was normally postured, with her seat track located in its forward-most position. The Cavalier was not equipped with a tilt steering wheel. She was not wearing her available, active, three-point, lap and shoulder belt and sustained, according to her interview, minor injuries which included: a bruise to her right forearm from the driver side air bag and bilateral knee contusions from the left side knee bolster. The right front passenger in the case vehicle (5 year-old female) was abnormally postured [i.e., lying down to the left (towards the Cavalier's driver), with her head laying partially on the driver's right thigh], with her seat track located between its middle and forward-most positions, and she was not wearing her available, active, three-point, lap and shoulder belt. She sustained, according to the interview with the Cavalier's driver (i.e., aunt) and her medical records, fatal injuries which included: a compound, depressed, right frontoparietal skull fracture and multiple critical brain lesions (i.e., a loss of consciousness, midbrain and intraventricular hemorrhages, epidural, intracerebral, and subdural hematomas, a cerebral contusion, and cerebral edema). Based on the available evidence, the brain and skull injuries resulted when this occupant's head came in contact with the center dash. In addition, she sustained a left pubic ramus fracture when she hit the floor-mounted transmission selector lever and bilateral leg fractures (i.e., proximal tibia and distal tibia and fibula), possibly from the deploying air bag.

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TRC/IU ON-SITE AIR BAG INVESTIGATION

TRC/IU CASE NO. 96-20

FLEET - PRIVATE VEHICLE LOCATION -

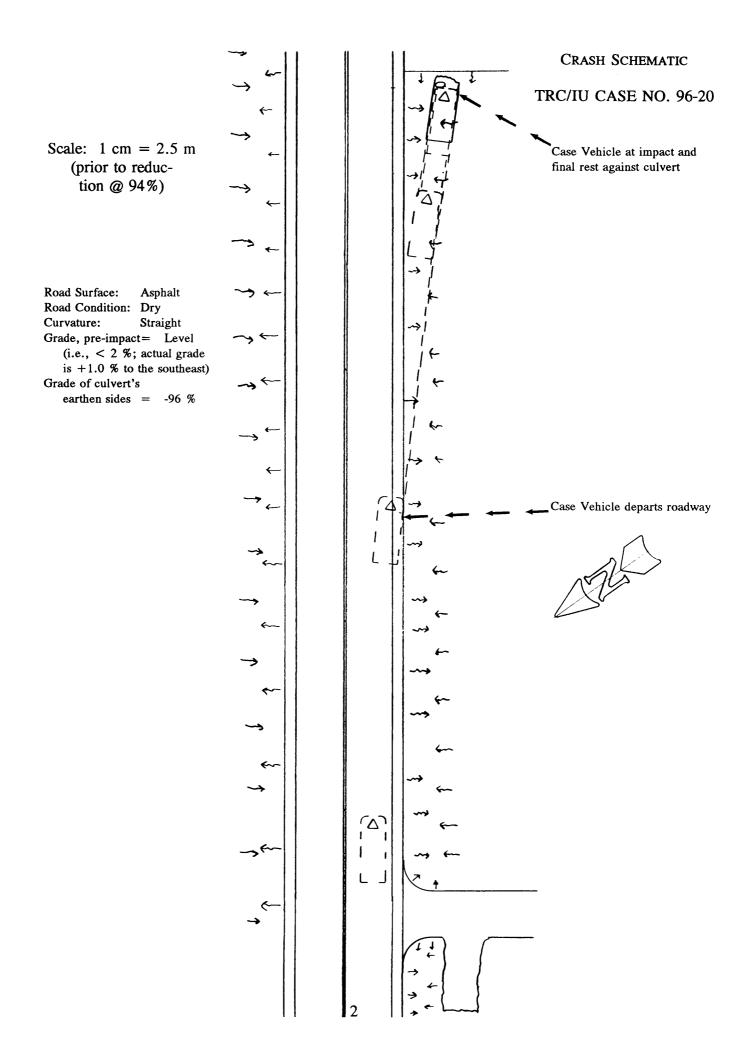
SUMMARY

This report concerns a motor vehicle crash involving an air bag equipped 1996 Chevrolet Cavalier, two-door coupe, which ran-off-road and impacted a culvert. This crash occurred in 1996 at 5:23 p.m., in a rural area on a state road. This crash is of special interest because the Cavalier's right front passenger (5 year-old female) sustained fatal head injuries, allegedly from her deploying right front air bag.

The Cavalier was traveling southeast in the southeast lane of a two-lane, undivided, state roadway when it veered off the roadway to the right. The Cavalier traveled approximately 29 meters (95 feet) along a drainage ditch prior to impacting the culvert. The Cavalier came to an a abrupt stop after impact and was heading southeast at final rest.

The front bumper and undercarriage of the Cavalier impacted the culvert. The Cavalier was towed due to damage from the scene. The direct damage was distributed across the entire front end of the Cavalier with the max crush being 28 centimeters (11.0 in.) near C₄. The wheelbase on the left (driver) side was shortened 9 centimeters (3.5 inches). The CDC was determined to be: 12-FDLW-2 for the Cavalier. The SMASH reconstruction program, barrier algorithm, was used on the highest severity impact to the Cavalier. The Total, Longitudinal, and Lateral Delta V's are respectively: 22 km.p.h. (14 m.p.h.), -22 km.p.h. (-14 m.p.h.), and 0 km.p.h. (0 m.p.h.). These resultants seemed low to this contractor.

The 1996 Chevrolet Cavalier was equipped with both driver and right front passenger supplemental restraint systems (air bags) which deployed as a result of the frontal impact. The driver of the Cavalier [year-old female--160 centimeters (63 inches), 54 kilograms (120 pounds)] was normally postured, with her seat track located in its forward-most position. The Cavalier was not equipped with a tilt steering wheel. She was not wearing her available, active, three-point, lap and shoulder belt and sustained, according to her interview, minor injuries which included: a bruise to her right forearm from the driver side air bag and bilateral knee contusions from the left side knee bolster. The right front passenger (year-old female--unknown height weight) in the Cavalier was abnormally postured [i.e., lying down to the left (towards the Cavalier's driver), with her head laying partially on the driver's right thigh], with her seat track located between its middle and forward-most positions, and she was not wearing her available, active, three-point, lap and shoulder belt. She sustained, according to the interview with the Cavalier's driver (i.e., aunt) and her medical records, fatal injuries which included: a compound, depressed, right frontoparietal skull fracture and multiple critical brain lesions (i.e., a loss of consciousness, midbrain and intraventricular hemorrhages, epidural, intracerebral, and subdural hematomas, a cerebral contusion, and cerebral edema). Based on the available evidence, the brain and skull injuries resulted when this occupant's head came in contact with the center dash. In addition, she sustained a left pubic ramus fracture when she hit the floormounted transmission selector lever and bilateral leg fractures (i.e., proximal tibia and distal tibia and fibula), possibly from the deploying air bag.



TRC/IU ON-SITE AIR BAG INVESTIGATION

TRC/IU CASE NO. 96-20

FLEET - PRIVATE VEHICLE LOCATION -

ACCIDENT DATA

Location/Street:

State Road

State:

Area/Type:

Rural, residential

Accident Date/Time:

1996, @ 5:23 p.m.

Investigating Police Agency:

County Sheriff Department

Accident Type:

Car - ran-off-road (head-on into culvert)

Occupant Injury Severity

(air bag vehicle):

Brain stem hemorrhage, loss of consciousness, right epidural hematoma, left subdural

hematoma (all AIS-5)

VEHICLE DAMAGE

EXTERIOR

Case Vehicle

Deployment Impact

Event number:

First

Object Struck:

Culvert

Damage location

Damaged Plane:

Front

Vertical Location

On Plane:

Bumper and below

Direct Begins:

Bumper corner to bumper corner

Length Direct:

114 cm (44.9 in)

Field L:

114 cm (44.9 in)

 C_1 :

0 cm (0.0 in)

 $\mathcal{C}_{\mathbf{l}}$.

12 cm (4.7 in)

 C_2 :

16 cm (6.3 in)

 C_3 :

27 cm (10.6 in)

C₄: C₅:

11 cm (4.3 in)

 C_6 :

5 ... (20:)

~6.

5 cm (2.0 in)

D:

0 cm (0.0 in) 28 cm (11.0 in)

Maximum Crush: Location:

Near C₄

VEHICLE DAMAGE (CONTINUED)

EXTERIOR (Continued) **Case Vehicle**

Deployment Impact (Continued)

12-FDLW-2 (00) CDC:

Damaged Components: Bumper, hood, splash pan, radiator, left front wheel

assembly, left and right fender, left and right front door assemblies, and hood

VEHICLE VELOCITY ESTIMATES

Highest Delta "V" **Case Vehicle**

Reconstruction Program: **SMASH**

Program Algorithm: Damage only, barrier option

Travel Speed: 25 k.p.h. (16 m.p.h.)

Total Delta "V": 22 k.p.h. (14 m.p.h.)

Longitudinal Delta "V": -22 k.p.h. (-14 m.p.h.)

Lateral Delta "V": 0 k.p.h. (0 m.p.h.)

CASE VEHICLE DRIVER INJURIES				
Description of Injury	<u>A.I.S.</u>	Source of Data	Injury <u>Mechanism</u>	<u>Certainty</u>
Contusion right forearm	790402.1,1	7	Air bag, driver's side	{Probable}
Contusion left knee	890402.1.2	7	Driver side knee bolster, left dash	{Certain}
Contusion right knee	890402.1,2	7	Driver side knee bolster, center dash	{Certain}

CASE VEHICLE RIGHT FRONT PASSENGER INJURIES				
Description of Injury	<u>A.I.S.</u>	Source of Data	Injury <u>Mechanism</u>	<u>Certainty</u>
Loss of consciousness (unresponsive to painful stimuli, decerebrate and decorticate posturing, pupils fixed and dilated, and deviated pupils)	160214.5,0	2	Center instrument panel (see SE-LECTED PHOTO-GRAPHS #40 and #41)	{Certain}

CASE VEHICLE RIGHT FRONT PASSENGER INJURIES (CONTINUED)				
Description of Injury	<u>A.I.S.</u>	Source of Data	Injury <u>Mechanism</u>	<u>Certainty</u>
Hemorrhage in midbrain	140210.5,8	2	Center instrument panel	{Certain}
Cerebral contusion between left basal ganglia and thalamus	140604.3,2	2	Center instrument panel	{Certain}
Hematoma, epidural, large, right frontoparietal	140636.5,1	2	Center instrument panel	{Certain}
Hematoma, intracerebral, NFS, right frontoparietal adjacent to epidural site	140638.4,1	2	Center instrument panel	{Certain}
Hematoma, subdural, large, left frontoparietal	140656.5,2	2	Center instrument panel	{Certain}
Cerebral edema, mild but never suitably controlled	140670.3,9	2	Center instrument panel	{Certain}
Hemorrhage, intraventricular, left and third ventricles and cerebral aqueduct	140678.4,9	2	Center instrument panel	{Certain}
Fracture, compound, right frontoparietal skull, slight depressed and comminution	150404.3,1	2	Center instrument panel	{Certain}
Fracture left pubic ramus	852600.2,2	2	Console mounted transmission selector level	{Probable}
Fracture, with displacement, right distal fibula	851610.2,1	2	Air bag, passen- ger's side	{Possible}
Fracture, with displacement, right distal tibia	853414.2,1	2	Air bag, passen- ger's side	{Possible}
Fracture, with displacement (Salter-1), left proximal tibial physis	853422.3,2	2	Air bag, passenger's side	{Possible}
Abrasion right distal shin	890202,1,1	3	Air bag, passen- ger's side	{Probable}

DISCUSSION

This report concerns a motor vehicle crash involving an air bag equipped 1996 Chevrolet Cavalier which ran-off-road and impacted a culvert. This crash is of special interest because the Cavalier's right front passenger (5 year-old female--unknown height and weight) sustained fatal head injuries, allegedly from her deploying right front air bag.

The Cavalier (case vehicle) was traveling southeast in the southeast lane of a two-lane, undivided, state roadway when it veered off the roadway to the right. According to the Police Accident Report and the scene evidence, the case vehicle traveled approximately 29 meters (95 feet) along a drainage ditch prior to impacting the culvert. Based on the scene inspection, there was no evidence of any attempted avoidance maneuvers. The impact caused the case vehicle's driver side and right front passenger side supplemental restraint systems (air bags) to deploy. According to the case vehicle's driver [17 year-old female--160 centimeters (63 inches), 54

DISCUSSION (CONTINUED)

kilograms (120 pounds)], she was distracted by the right front passenger who at the time was laying across the front seat with her head partially on the driver's right leg. According to the case vehicle's driver, she was attempting to get the right front passenger back into the proper seating position when she veered off the right (southwest) side of the road.

The front bumper and undercarriage of the case vehicle impacted the culvert and came to a abrupt stop heading southeast. The direct damage was distributed across the entire front end of the case vehicle with the max crush being 28 centimeters (11.0 in.) near C₄. The wheelbase on the left (driver) side was shortened 9 centimeters (3.5 inches). The CDC for the case vehicle was determined to be 12-FDLW-2. The SMASH reconstruction program, damage only, barrier option algorithm, was used on the culvert impact. The Total. Longitudinal, and Lateral Delta V's are respectively: 22 km.p.h. (14 m.p.h.), -22 km.p.h. (-14 m.p.h.), and 0 km.p.h. (0 m.p.h.). These resultants seemed low to this contractor considering that the posted speed limit is 89 km.p.h. (55 m.p.h.), and there was no evidence of braking¹ prior to impact.

According to the case vehicle's driver, immediately prior to the crash she was normally postured (i.e., seated upright with her back against the seatback, and at least one hand on the steering wheel²). According to the case vehicle's driver, her seat track was located in its forward-most position, and her seatback was completely upright. According to the vehicle inspection, the case vehicle's driver seat track was in the forward-most position with the seatback in the slightly reclined position. This contractor believes that the young driver was not sure or just did not know the exact seatback position. The case vehicle was not equipped with a tilt steering wheel. According to the driver's interview, she was also restrained by the her available, active, three-point, lap and shoulder belt. The Police Accident Report was encoded as unknown belt usage.

Based on the Police Accident Report, the vehicle and scene inspections, and occupant kinematic principles, the case vehicle's impact with the culvert, not only deployed the driver side air bag, but thrust the driver forward and upward where she contacted the deploying air bag, loaded the steering column, and contacted the knee bolster with her knees (i.e., see Selected Photo-Graph #34). Subsequently, the air bag redirected the driver upwards where she contacted the sunvisor (i.e., see Selected Photograph #38).

According to the vehicle inspection, the steering column was collapsed (i.e., stroked) approximately 5 centimeters (2 inches), indicating that the driver significantly loaded her air bag as she was thrown forward at impact. An inspection of the case vehicle's driver side air bag revealed what appeared to be oil and skin transfers to the right side of the air bag indicating contact by the case vehicle's driver. Based on the lack of driver reported seatbelt pattern bruising and the lack of loading evidence (moderate speed crash) found on the driver's belt system, this contractor believes that no safety belts were used. It should be noted that the case vehicle was not equipped with a shoulder belt adjustor. According to the case vehicle's driver, she sustained a bruise to her right forearm from the air bag and bilateral knee contusions from the driver side

The case vehicle most likely decelerated from the point where it left the roadway to the point of impact by the driver removing her foot from the accelerator.

According to the case vehicle's driver, she could not recall exactly where her feet were positioned or which hand(s) were on the steering wheel.

DISCUSSION (CONTINUED)

knee bolster. As a result of the driver's sunvisor contact, she rebounded back into her seat. According to the case vehicle's driver, she had no recollection of how she moved in the vehicle before, during, or after the crash.

At final rest the case vehicle's driver could only recall getting out and going around to the passenger side of the vehicle and removing the right front occupant. It should be noted that the case vehicle's driver seemed reluctant to provide any information pertaining to the crash. She would not respond to questions when asked and did not seem the least bit interested in what this contractor was there trying to do.

According to the case vehicle's driver (i.e., aunt), immediately prior to the crash the right front passenger was abnormally postured [i.e., lying down to the left (towards the case vehicle's driver), with her head laying partially on the driver's right thigh]. In addition, the driver could neither recall if the right front passenger's legs were laying across the seat cushion or hanging down over edge of cushion, nor where her hands were. According to the case vehicle's driver, the right front passenger's seat track was located between its middle and forward-most positions, with the seatback completely upright. According to the vehicle inspection, the right front passenger's seat track was between the middle and forward-most positions, with the seatback almost completely reclined. This contractor believes that the case vehicle's young driver was either not sure or just did not know the exact position or the seatback. According to the driver's interview, she could not recall if this occupant was wearing her available, active, three-point, lap and shoulder belt. It should be noted that the case vehicle was not equipped with a shoulder belt adjustor. The Police Accident Report was coded as no belt usage. Based on this passenger's medical records and the lack of loading evidence (moderate speed crash) found on this occupant's belt system, this contractor has concluded that no safety belts were used.

Based on the Police Accident Report, the vehicle and scene inspections, and occupant kinematic principles, the case vehicle's impact with the culvert not only deployed the right front air bag, but thrust the right front passenger forward and slight upward where she contacted the center instrument panel, floor mounted transmission selector lever, and deploying right front air bag. Based on this occupant's pre-crash posture, the case vehicle's impact with the culvert would have thrown this occupant's head forward where the vehicle inspection found a contact to the corner of the padded center dash (see Selected Photographs #40 and #41). In addition, the inspection of the right front air bag revealed what appeared to be oil and skin transfers to the left edge of the air bag indicating possible contact with this occupant's legs.

According to the right front passenger's medical records, she sustained a compound, depressed, right frontoparietal skull fracture and multiple critical brain lesions. Based on the available evidence, the brain and skull injuries resulted from this occupant's head contact with the dash. In addition, she sustained a left pelvic fracture (i.e., left pubic ramus) when she hit the transmission selector lever and bilateral leg fractures, possibly from the deploying air bag. The air bag then thrust this occupant back into her seatback.

According to the case vehicle's driver, at final rest all she could recall was that the passenger was still laying similar to her pre-crash position, prior to removing her. Based on the vehicle inspection (blood drainage along the outside of right front seat cushion), this contractor believes this occupant's legs were laying towards the right over the outside of the seat cushion.

Appendix A:

SMASH PROGRAM RESULTS

(DAMAGE ONLY ALGORITHM

-- INCLUDING

BARRIER EQUIVALENT SPEEDS)

SMASH PROGRAM SUMMARY

BEST AVAILABLE

National Highway Traffic Safety

(All Measurements in Metric)

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Administration			CRASHWORTHINESS DATA SYSTE
Identifying Title			
10	9620	01	
Primary Sampling Unit	Case NoStratum	Accident Event Sequence No.	Date (Month, day, year) of Run
	GENERA	L INFORMATION	
VEH	IICLE I		VEHICLE 2
NASS Vehicle Number	0	NASS Vehicle N	Number
Year	1996	— Year	
Make Cheu	rolet	— Make	
Model Caval	ier	Model	
Body Style	25	Body Style	
CDC	12 FD LW	CDC	BARRIER
PDOF	± 0	• PDOF	± °
Heading Angle	± / 3 4	 Heading Angle 	±
	VEHICLE	SPECIFICATIONS	
VEH	ICLE I		VEHICLE 2
Wheelbase	264 cr	m Wheelbase	cm
Overall Length	458 cr	n Overall Length	cm
Overall Width 54 Aunt		n Overall Width	cm
	f syamold	Weight	*
1,249+ 73 + 0	<u>) = 1322</u> k	g+_	+=kg
Curb Occupant(s) Carg	go	Curb Occupa	ant(s) Cargo
Engine Displacement	2.2	L Engine Displacer	ment L
Drive System	FWD	Drive System	
Size	<u> </u>	Size	
Stiffness		Stiffness	
	DAMAGE	INFORMATION	
VEHI	CLE I)	VEHICLE 2
Damage Known?	<u> </u>	_ Damage Known	
Damage Length		n Damage Length	cm
Damage Offset	±	n Damage Offset	± cm
Crush Depth:	C1O cn	n Crush Depth:	C1 cm
	C2 cn	n	C2 cm
	C3/ <u>&</u> cn	n	C3 cm
	C4 2 7 cn	n	C4 cm
	C5/cn		C5 cm
	C6	n	C6 cm
			•

SCENE INFORMATION			
Flest and Impage Positions [1, 1] No. (1, 1) Yes (
VEHICLE 1	VEHICLE 2		
Rest X m	Rest X m		
Position Y m	Position Y m		
Heading Angle °	Heading Angle		
Impact X	Impact X m		
Position Y	Position Y m		
Heading Angle °	Heading Angle		
Slip Angle (-180 to +180)	Slip Angle (-180 to +180) •		
VEHIC	LE MOTION		
Sistingi Control i i No. i il Vis	Sistemed Contact if 1100 1725		
VEHICLE 1 VETICO ROJERON Rotation Stop Before Rest [] No [] Yes	VEHICLE 2 Vehicle Rotation Rotation Stop Before Rest [] No [] Yes		
End of Rotation X m	End of Rotation X m		
Position Y m	Position Y m		
Heading Angle °	Heading Angle • Curved Path s		
Point on Path X . m Y . m Statement Direction None LGW LGW Rotation > 360° [] No [] Yes	Point on Path X . m Y . m Rotation Director [1] Note [200] CCV Rotation >360° [] No [] Yes		
FRICTION	INFORMATION		
Coefficient of Friction Rolling Resistance Option	· <u> </u>		
Vehicle 1 Rolling Resistance	Vehicle 2 Rolling Resistance		
LF RF LR RR	LF RF LR RR		
IF THIS COMMON IMPACT WAS WITH A CDS VEHICL	E NOT IN TRANSPORT, FILL IN THE INFORMATION BELOW.		
Model Year:	The Weight, CDC, Scene Data and Damage Information for this vehicle should be recorded above.		
Make:			
Model:	Germaleice and ATPADEL like ចេចកស្មែកក្នុងស្មែ		
VIN:	ilmage skileh malitmersions a the form		

Summary of Results Using Damage

Special Crash Investigations, TRC/IU 96-20, Task 0060

```
Speed Change
(Damage)

Vehicle #1

Total 22 km/h ( 14 m)
```

Total 22 km/h (14 mph)
Longitudinal -22 km/h (-14 mph)
Latitudinal 0 km/h (0 mph)
PDOF Angle $0^{\frac{1}{2}}$

Energy Dissipated = 24547 Joules (18102 Ft-Lb) Barrier Equivalent Speed = 21.9 km/h (13.6 mph) Calculated using crush coefficients entered by the user.

 Vehicle #2

 Total
 0 km/h (0 mph)

 Longitudinal
 0 km/h (0 mph)

 Latitudinal
 0 km/h (0 mph)

 PDOF Angle
 0 ½

Energy Dissipated = 0 Joules (0 Ft-Lb Barrier Equivalent Speed = 0.0 km/h (0.0 mph)

Calculated using size and stiffness categories.

General Information

Year Make Model	Vehicle #1 ááááááááá 1996 Chevrolet Cavalier	Vehicle #2 áááááááááá 1900
CDC Side Damaged PDOF Angle Heading Angle	12FDLW2 F 0 ½ 134 ½	BARRIER 0 ½ 0 ½

Calculation method: Vehicle's Crush Coeff. Size and Stiffness

 Size Category
 **
 11

 Stiffness Category
 **
 11

 Vehicle Weight
 **
 453592 kgs (999999 lbs)

 d0 crush coeff.
 99.19 sqrt(N)
 ***** sqrt(N)

 d1 crush coeff.
 6.47 sqrt(N)/cm
 ***** sqrt(N)/cm

1997

Damage Information

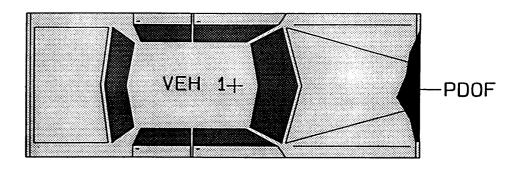
Page 2

Vehicle Damage Known	Vehicle #1 ááááááááá Yes	Vehicle #2 áááááááááá Yes
Crush Length	132.0 cm (52 in)	0.0 cm (0 in)
C1	0.0 cm (0 in)	0.0 cm (0 in)
C2	12.0 cm (5 in)	0.0 cm (0 in)
C3	16.0 cm (6 in)	0.0 cm (0 in)
C4	27.0 cm (11 in)	0.0 cm (0 in)
C5	11.0 cm (4 in)	0.0 cm (0 in)
C6	5.0 cm (2 in)	0.0 cm (0 in)
D	0.0 cm (0 in)	0.0 cm (0 in)
D'	3.6 cm (1 in)	0.0 cm (0 in)

Vehicle Dimensions

	Vehicle #1 ááááááááá	Vehicle #2 ááááááááá
Length	458.0 cm (180 in)	0.0 cm (0 in)
Width	171.0 cm (67 in)	0.0 cm (0 in)
Wheelbase	264.0 cm (104 in)	254.0 cm (100 in)
Weight	1322 kgs (2915 lbs)	453592 kgs (999999 lbs)
CG to Front of Veh	211.6 cm (83 in)	127.0 cm (50 in)
Engine Displacement	2.2 liters	0.0 liters
Moment of Inertia	250531 kgs (22175 lbs) 29	375740821 kgs (2600101632 1
Vehicle Mass	1322 kgs (7.6 lb-s^2/in) 453	3515 kgs (2600.1 lb-s^2/in)

1996 Chevrolet Cavalier



Special Crash Investigations, TRC/IU 96-20, Task 0060 1997

NO DATA

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PAGE NUMBER(S)

9-11

Appendix B:

SELECTED PHOTOGRAPHS

A total of fifty color copies of photographs are presented and referenced as Photograph #01 through Photograph #50. All of these photographs were taken by the Transportation Research Center.



01: Case vehicle's southeastward path of travel in southeastbound lane approximately 70 meters (230 feet) from impact



02: Case vehicle's southeastward path of travel approximately 60 meters (197 feet) from impact



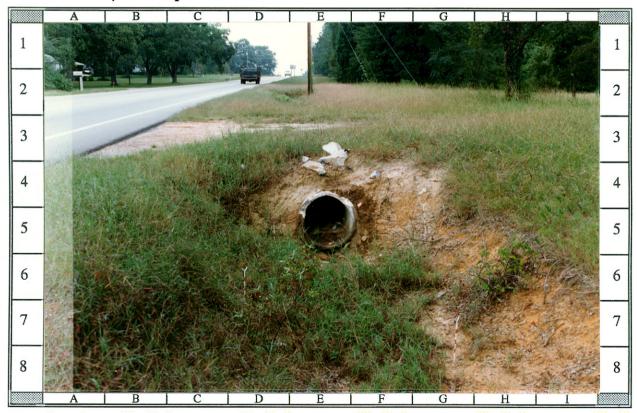
03: Case Vehicle's southeastward travel path near point of roadway departure approximately 35 meters (115 feet) from impact



04: Case Vehicle's off road path of travel entering ditch approximately 20 meters (66 feet) from impact with culvert



05: Case Vehicle's southeastward travel path in ditch approximately 10 meters (33 feet) from impact with culvert



06: Case Vehicle's southeastward travel path in ditch approximately 5 meters (16 feet) from impact with culvert



07: Southeastward view of impacted culvert and Case Vehicle's position at final rest; NOTE: red/white stakes represent final rest positions of front tires



08: Northeastward view of damaged drainage pipe and debris from Case Vehicle; NOTE: stake marks left front tire's final rest position



09: Northwest view of Case Vehicle's southeastward path of travel from southeast of point of impact; NOTE: stakes in ditch represent Case vehicle's travel path



10: Northwest view of Case Vehicle's southeastward travel path from point of roadway departure; NOTE: red/white stake represents right front tire



11: Case Vehicle's damaged front without contour gauge present; NOTE: damage primarily to bumper and below



12: Case Vehicle's damaged front viewed from bumper level without contour gauge; NOTE: extensive damage below bumper



13: Case Vehicle's damaged front with contour gauge present at bumper level



14: Case Vehicle's damaged front viewed from approximately 30 degrees left of front; NOTE: induced damage to hood and left fender



15: Close-up of Case Vehicle's damaged front viewed at bumper level from approximately 45 degrees left of front; NOTE: induced left fender damage near door



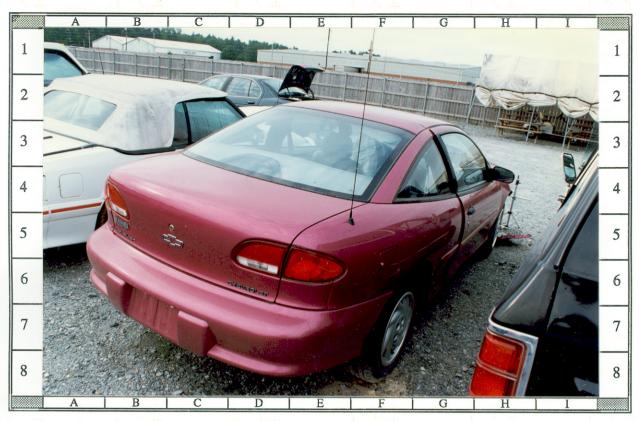
16: Close-up of Case Vehicle's damaged left front wheel assembly; NOTE: left front wheel shoved rearward



17: Case Vehicle's undamaged left side (i.e., behind left fender) and back viewed from approximately 45 degrees left of back



18: Close-up of buckling to Case Vehicle's left roof near "B"-pillar



19: Case Vehicle's undamaged back and right side viewed from approximately 30 degrees right of back



20: Close-up of buckling to Case Vehicle's right roof near "B"-pillar



21: Reference line view of Case Vehicle's damaged front from right; NOTE: contour gauge placed and crush measurements taken below bumper



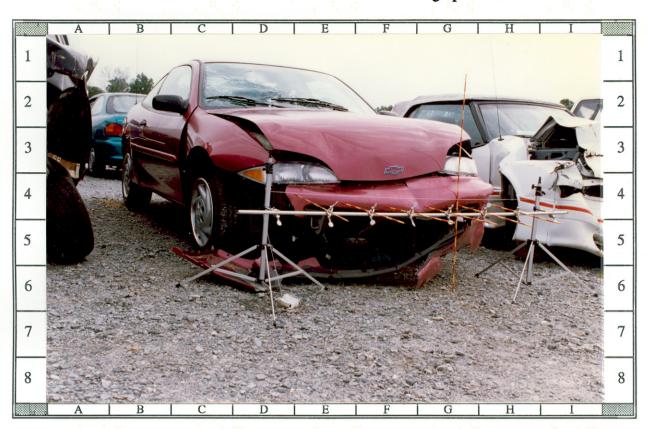
22: Close-up reference line view of Case Vehicle's below bumper crush from right



23: Case Vehicle's damaged front viewed from approximately 30 degrees right of front with contour gauge present at bumper level



24: Close-up of Case Vehicle's damaged right windshield; windshield cracked from right front air bag module's cover flap



25: Case Vehicle's damaged front viewed from approximately 20 degrees right of front showing undercarriage damage below bumper



26: Closer-up view of Case Vehicle's extensive undercarriage damage with contour gauge present below bumper



27: Close-up view of Case Vehicle's undercarriage damage with contour gauge present showing specifically torn radiator from impact with drainage pipe



28: Closer-up view of Case Vehicle's undercarriage damage focusing specifically on torn radiator at C₃ and C₄ crush rods from impact with drainage pipe



29: Interior surface of Case Vehicle's driver door panel and deployed front air bags



30: Case Vehicle's front seating area showing black vertical striations (cell G3) and contact evidence (i.e., green dot) to driver's air bag



31: Close-up of contact evidence (skin and oil transfers--green dot) to Case Vehicle's driver air bag



32: Black vertical transfer on Case Vehicle's driver air bag from driver side air bag module's cover flap (see Photo #33)



33: Case Vehicle's noncontacted driver side air bag module's cover flaps; NOTE: black vertical transfer marks on air bag near top portion of cover flaps



34: Close-up of Case Vehicle's contacted knee bolster on both sides of steering column



35: Close-up of buckling to Case Vehicle's driver side floor pan



36: Angled close-up through Case Vehicle's damaged windshield showing steering wheel pushed inward toward dash approximately 5 centimeters (2 inches)



37: Panoramic view of Case Vehicle's front seating area showing deployed air bags and damaged glazing



38: Case Vehicle's driver side sunvisor showing contact from driver's head



39: Case Vehicle's driver side seatbelt's "D"-ring showing no evidence of loading or usage during crash



40: Case Vehicle's contacted center console and left edge of right front passenger air bag



41: Close-up of Case Vehicle's contacted center console (i.e., between dots); NOTE: skin transfer (cell E3) is from right front passenger's head



42: Case Vehicle's contacted center console and deployed right front passenger air bag; NOTE: rearview mirror contacted by air bag



43: Close-up of observed contact area to left lower edge of Case Vehicle's right front passenger air bag



44: Case Vehicle's deployed right front passenger air bag; NOTE: no obvious contact evidence found to front of air bag



45: Case Vehicle's noncontacted but damaged (i.e., from striking windshield) right front air bag module's cover flap; NOTE: plastic piece holds up windshield



46: Case Vehicle's right front glovebox and knee bolster; NOTE: no evidence found of occupant contact



47: Case Vehicle's right front passenger seatbelt showing no visible evidence to outside of webbing (e.g., blood)



48: Case Vehicle's right front passenger seatbelt showing no visible evidence to inside of webbing (e.g., blood)



49: Case Vehicle's right front passenger seat showing dried blood drainage to outward base of cushion



50: Case Vehicle's rear seating area; NOTE: front right seatback reclined and outboard three-point belts and no rear head restraints

TRANSPORTATION RESEARCH CENTER

Indiana University Bloomington, Indiana 47403-1599

ON-SITE AIR BAG INVESTIGATION

NASS CDS FORMS AND MEDICAL RECORDS

CASE NO. - 96-20 FLEET - PRIVATE VEHICLE LOCATION -ACCIDENT DATE - 1996

Submitted By:

Senior Staff Associate and

Associate Scientist

1997

Revised Submission:

2001

Contract Number: DTNH22-94-D-17058

Prepared for:

U.S. Department of Transportation National Highway Traffic Safety Administration National Center for Statistics and Analysis Washington, D.C. 20590-0003

POLICE ACCIDENT REPORT

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Accident With INjury	96 @ 5:23 P.M.
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PASSENGER ?	(SEVERE HEAD TRAUMA)
	(possibly both legs broken)
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hespital.	
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told she couldn't And to	sit up. Somehow during
this exchange, Lost	control of the vehicle RAM
off the road and struck A	24 CONCRETE CULVERT, THE
CAR WAS A total loss. Both	
driver was unjured due to h	HER AIR BAY, THE Child, Who
WAS NOT RESTRAINED, WAS SEVE	noting injured. They were both
bringit to the E.R. by A	yet unidentified passerby. It
is believed that this is when	RE the RUMOR STARTED POINT A
SECOND VEHICLE That fled the	E SCENE, Actually, the so
CAlled Second VEHICLE, WAS RUS	thing the accident victims to
the hasnitak	
· · · · · · · · · · · · · · · · · · ·	49- 1-11 01 1 1 2:11:

SUPPLEMENTAL signs of cuts, scratches or abraisions except a comple of small scratches on the outer keft leg were the Ankle AREA. I was unable to SEE any type injury that would indicate the child had been RUN NER. THERE WAS A Slight depression on the upper Left FOREHEAD, I was told the child's SKULL WAS FRACTURED. There were in cuts or abraisions associated AREA of injury. THERE WAS A SMALL HICKLE of blood from both wastrib. This was apparently due to the sevene head injury. TROOPER ARRIVED. HE had been CALLED by Copt. Also. I briefed Top on what I know, if viewed the physical condition of the child and agreed there WAS NO EVIDENCE to SUPPORT THE THEORY THE Child BEEN RUN OVER. HE AGREED FOR that the hEAD injury appeared to be blunt force transo. Tope. Col. If. And went to view the Accident scene. It appeared as Though the VEHICLE VERTED OF The RUNDLEY on the passenger sive travelled Approx 95' down the ditch chivery under a driveway A 24" and struck head on The culvery brought the CAR to a dead stop. There WAS NO SIGN THE DRIVER EVER Applied bRISKES. There were Additional tracks on the other side of the drive. These tracks are afficiented to the vericle that took the Accident victims to the E.R. All then eade to MOLIVE / WRECKER Shop. is the WRECKER SERVICE that towed the nehicle IN. The Motor, transmission drive shaff and other parts of the CAR WERE KNOCKED LOOSE, The impact was so great that it crimped the ROOF of the CAR just behind the door parts on both CAR doors. The windshield on the passenger side was Shattered. When the passenger side Air bag deployed The door that secured the bag flow up and shattered the windshield. There was no damage done to the ment panel on the dash, or steering wheel or steering

AIGINAL SUPPLEMENTALIZE
If is Not KNOWN EXACTLY What CAUSED THE TRAUMA
To the child's head. After carefully inspecting the
to the child's head. After carefully inspecting the interior of the vehicle thoroughly, we decided that
the only object in the interior that could have consed
the injury was the console. It is slightly rounded
and padded. This would account for there being No
CONTUSION AROUND THE hEAD WOUND. WE believe that if
the child was beginning to sit up at the time of
impact, then when the boy deployed, the force of
the bag drove her down hard outo the CONSOLE COVER.
This was the conclusion that Top. Col.
Lt. and I All AGRETED ON.
Capt. and I all regard on. Capt. Report should be more
detailed concerning the deiner's remarks becouse he
interviewed her.

PAGE 1 OF 1

STATE OF BUREAU OF INVESTIGATION DIVISION OF FORENSIC SCIENCES OFFICIAL REPORT

NUMBE	

1996

VICTIM:

SUSPECT:

OFFICERS:

AGENCY:

COUNTY:

CPL.

SHERIFF'S OFFICE SOL.STATE COURT

DESCRIPTION:

ON 1996 AT 11:50 THE FOLLOWING EVIDENCE WAS RECEIVED FROM LT.

HEAT-SEALED PLASTIC BAG CONTAINING TWO GLASS TEST TUBES WITH GRAY RUBBER STOPPERS LABELED BOTH CONTAINING BLOOD

SERVICE REQUESTED:

BA BLOOD ALCOHOL PERFORMED BY

RESULTS:

THE BLOOD IS NEGATIVE FOR ETHYL ALCOHOL. ANALYSIS PERFORMED BY GAS CHROMATOGRAPHY.

CD CHECK FOR DRUGS

RESULTS:

THE BLOOD SPECIMEN IS NEGATIVE FOR A DETECTABLE QUANTITY OF BARBITURATES, CERTAIN BENZODIAZEPINES, COCAINE AND/OR METABOLITES, COMMON OPIOIDS, AMPHETAMINES, AND CANNABINOIDS (MARIJUANA). (IMMUNOASSAY TEST(S)) (KLD)

RESPECTFULLY SUBMITTED,

B.S. Forensic Toxicologist SELECTED NASS CDS VEHICLE FORMS: CASE VEHICLE

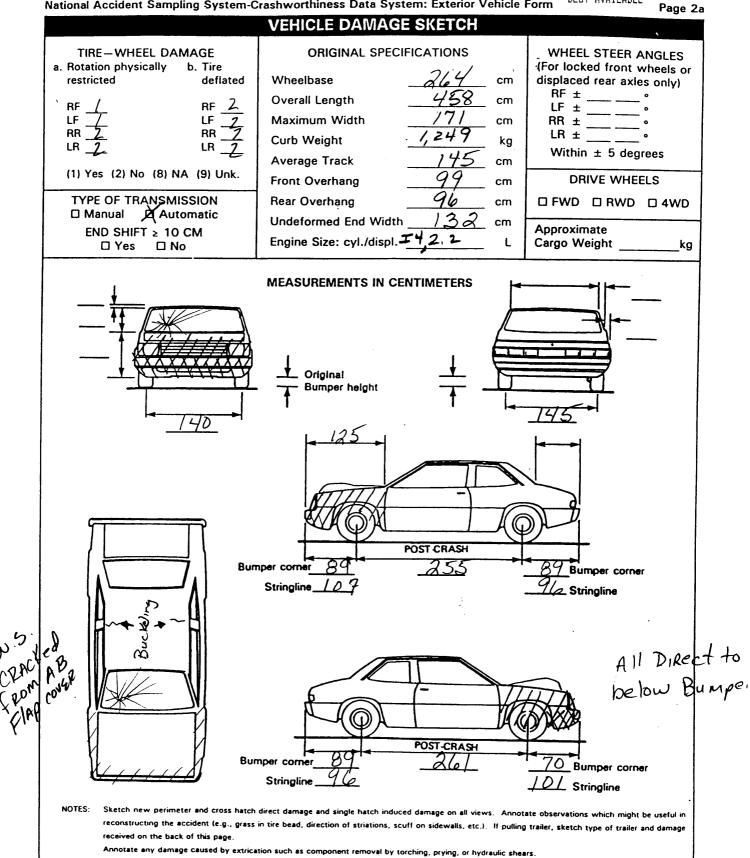
EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Administration	on						<u> </u>	CRA	SHWORT	HINESS DA	TA SYSTE
1. Prim	ary Sampling Unit N	_		0	3. Vehi	icle Nun	nber				0/
2. Case	Number - Stratum	_/	62	0							
			VEHICLE	IDEN	TIFICA	TION					
	GIJC			7_				_	Model	Year _	76
Vehicle M	lake (specify):	hevr				le Mode	l (specif	y):	AVA	Meie	<u> </u>
				LOCAT							
Locate the impacts of	ne end of the dama or an undamaged ax	ge with res de for side i	pect to the mpacts.	vehicle'	's dama	ged cen	ter poin	t or bur	nper co	rner for	end
Specific Imp	pact No. Location	of Direct Dam	nage		Locati	on of Field	j L		Location	of Max C	rush
0	BC to I	BC be	1mper	AC	ROSS	FROM	t Bu	mpar		C-4	
	and	d bel	owi								
		CRL	JSH PROF	ILE IN	CENTI	METER	RS				
i 1	Identify the plane at sill, etc.) and label a Measure C1 to C6 fimpacts. Free space value is the individual C local side taper, etc. Recurse()	rom driver t defined as t itions. This cord the valu	(e.g., free to passenge the distance may includ ue for each	space). er side in e betwee le the fo C-meas	front o en the b illowing: urement	r rear in aseline a bumpe and ma	npacts a and the r lead, t aximum	original orush.	to front	in side	akon at
Specific Impact Number	Plane of Impact C-Measurements	Direct (Width (CDC)	Damage Max Crush	Field	C,	C ₂	C ₃	C.	C ₅	C ₆	±D
01	@ Bumper	114	19	114	18	15	19	12	20	31	
	F954	7.7	3	 	26	16	1 3	1 2	16		
	ADJ		16		0	76	- 	10	7	26	
	703		16			0	16	17		3	
01	Rel Bunge	114	71	114	39	54	10	71	110		
<u> </u>	Bebw Bumper Free	117		117		 ~ / -	59		48	47	
			31	 	31	31	3)	31	31	31	
	ADJ		40		8	23	28	40	17	16	
					<u> </u>						
	FINAL AVG	114	28	114	0	11.5	16	27	10.5	5	

ORIGINAL SPECIFIC	ATIONS WORK SHEET
Wheelbase	inches x 2.54 = $2 6 4$ cm
_	inches x 2.54 = 458 cm
	inches x 2.54 = $\frac{1}{2} \frac{7}{7} \frac{1}{10} $ cm
Curb Weight $\underline{2,7553}$	pounds x $0.4536 = 1, 248 \text{ kg}$
Average Track 57.6 57.15	inches x 2.54 = $\frac{145}{\text{cm}}$
Front Overhang	inches x 2.54 = $\underline{999}$ cm
Rear Overhang	inches x 2.54 = 96 cm
Undeformed End Width	inches x 2.54 = 132 cm
Engine Size: cyl/displ.	cc x 0.001 =
I4 Spassengers 133 2-door coupe, 3-speed Automo	CID x 0.0164 = 2.2 L
Shipping Weight	Auto Tronsmission
5-speed Manual	2498 136 165
3-speed automatic	2,598 2,634 2,00 2,734 2,753
5-speed manual	2,734 2,753

SPECIAL CRASH INVESTIGATION ADDENDUM										
Color: {specify}	Repair Cost: \$									
Manual Speed 3-speed	4-speed 5-speed Other:									
Manual Type: rack-and-	pinion worm-and-gear Other									
	sc 4-wheel drum 4-wheel hydraulic c, rear drum Other:									
ntal vehicle Leased vehicle	Commercial vehicle Other									
1	Color: {specify} Manual Speed: 3-speed Manual Type: rack-and- Manual Type: 4-wheel di									

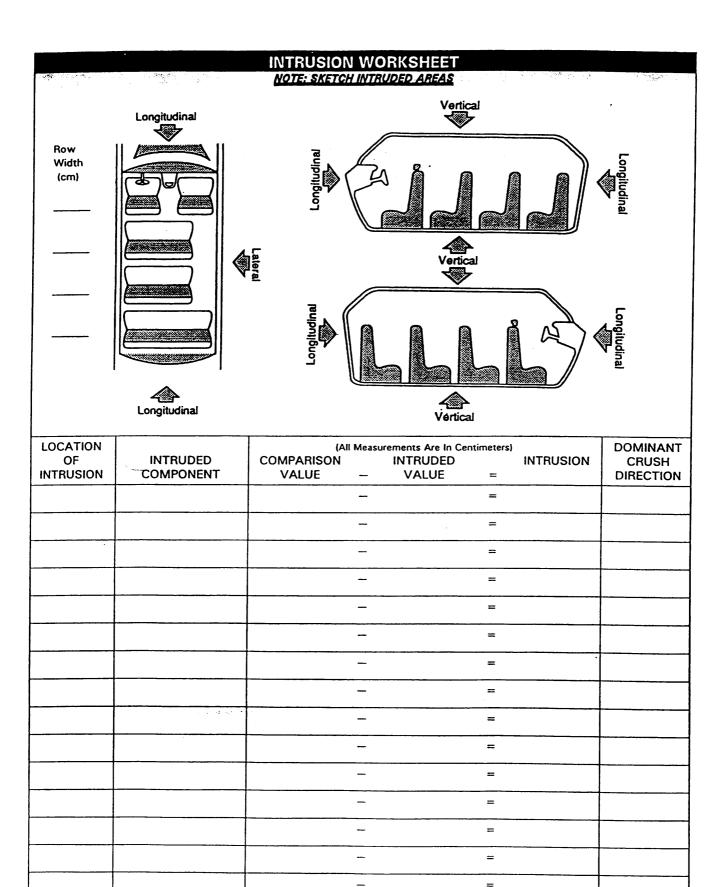


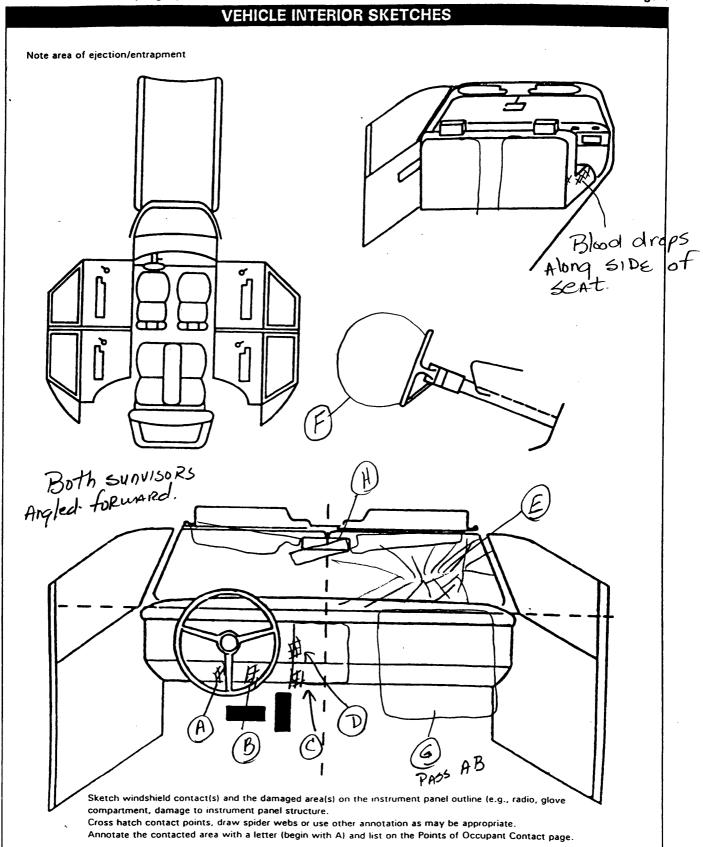
CHEVROLET Division			ors Corp.				
			Dimension	s		Factory	Factory
Type of Body		Wheel	Inches	Sh	•	List	Del'd
Pass. Cap.	Model	Base	Lt. x Wt. x	Ht. W	t. H.P.	Price	Price
1996 Caprice Classic RV	VD V8 cvl 5	.7 liter	SFI Gas Engi	ine(LT1)	(16 valve		
Born & Stroke 4 Ov3 48: Tay H 6	51 2 SAF H	P. 26060	5000: Torque 330	DED 2400: 3	50 cu.m., 5.7	Titter (Sedan)
Bore & Stroke 4.0x3.48; Tax H.F	P. 51.2; SAE H.	.P. 260@	4800; Torque 330	D @ 2400; 3	50 cu.in., 5.7	liter (Wagor	7)
Auto, Trans. 4-speed; EPA Miles	age Estimate 1	7/25	04 4 48 77 68 6		.0 610	20 455	24 045
6-PS 4-dr NB Sedan			214.1" x 77.5" x 5 214.5" x 77.5" x 5			20,455	21,045
Police Vehicle 8-PS 4-dr Wagon 3-seats	1BL 1979C 1	115.9 115.9"	217.3" x 79.6" x 6	30.7 435		22,405	22,995
Ontione Caprice Series: Destinat	ion Charges-\$	590 5 7 li	ter V8 EFI Gas E	naine(LT1	Sedan-\$556): Preferred	Equip.
Group Whose (1)-\$948 (2)-\$182	1: I imited Slip i	Differentia	al Sedan-\$250 W	agon-\$100); Leather Se	ats(AM6)-\$7	75; Sus-
pension (Sport)(B4U) -\$508; Wh	eel (Aluminum	w/Locks)	-\$250 (Deluxe C	overs)-\$21	5; Woodgrai	n Enterior-\$5	i95
1996 Cavalier Series FW	DIA cvl 2	2 liter (HV SFI Gas	Engine/	LN2V8 va	lve)	
Bore & Stroke 3.5x3.46; Tax H.F	196 SAF H	P 1206	5200: Torque 130	A4000.(1	33 cu.in., 2.2	liter	
Man. Trans. 5-speed(MK7); EP/	A Mileage Estin	nate 25/3	4				
5-PS 2-dr NB Coupe	1JC37/1SA	104.1"	180.3" x 68.7" x 5		8 19.6	10,500	10,995
5-PS 4-dr NB Sedan			180.3" x 67.9" x 5			10,700	11,195
4-PS 2 de Convertible LS			180.3" x 68.7" x 5		25 19.6	16,705	17,200
Auto, Trans. 3-speed(MD9) EP	A Mileage Esti	mate 25/3	4 (Wagon) 2/31 180.3" x 68.7" x 5	n ~ (76)	19.6	11,050	11,545
5-PS 2-dr NB Coupe 5-PS 4-dr NB Sedan	11/69	104.1	180.3" x 67.9" x 5	54 0° 25	3 19.6	11,250	11,745
Auto, Trans. 4-speed(MN4); EPA			100.0 207.0 20	J 1.0 200		,	,
5-PS 4-dr NB Sedan LS			180.3" x 67.9" x 5	54.9° 265	5 19.6	12,900	13,395
4-PS 2-dr Convertible LS	1JF67/1SP	104.1"	180.3" x 68.7" x 5	53.9" 282	25 19.6	17,500	17,995
1996 Cavalier Series FW	(D. 4 av.) 2 4	liter De	NUC SEI Gae	Engine	(I DQV16 v	(ava)	
Bore & Stroke 3.54"x3.7"; Tax H	D 4 Cyl 2.4	HP 150	160 57 Torque	15060 4400	146 cu in	2.4 liter	
Man. Trans. 5-speed(MJ1); EPA	Mileage Estin	nate 23/3	3		,		
5-PS 2-dr NB Coupe Z24	1JF37/1SL	104.1"	180.3" x 68.7" x 5	53.2° 274	1 20.05	14,200	14,695
4-PS 2-dr Convertible LS		-	180.3" x 68.7" x 5	53.9° 293	32 20.05	17,100	17,595
Auto. Trans. 4-speed(MN4); EP						44005	45 400
5-PS 2-dr NB Coupe Z24			180.3" x 68.7" x 5 180.3" x 67.9" x 5			14,995 13,295	15,490 13,790
5-PS 4-dr NB Sedan LS 4-PS 2-dr Convertible LS			180.3" x 68.7" x 5			17,895	18,390
Options Cavalier Series: Destina	tion Chamers-	\$495: 4 c	d 23 liter PFI OH	N Gas En	aine(LD9) LS		
Trans, 3-speed-\$550 Z24-std, Au	to. Trans. 4-sp	seed-\$790	5; Preferred Equip	p. Groups	Base Coupe	(1SA)-std (1	SB)-\$240
(1SC)-\$696 (1SD)\$1295 Sedan	1 (1SE)-std (1S	F)-\$223 (1SG)-\$593 LS S	edan(1SH)	-std (1SJ)-\$4	435 (15K)-\$ 1	225 Z24
Coupe (1SL)-std (1SM)-\$290 (1S	N)-\$975 Conv	ertible (1	SP)-std (1SQ)-\$4	35 (1SR) -	\$1120; Air Co	onditioning(C	60)-\$795
LS-std Z24-std; Apearance Pkg(\) dan-\$250 Coupe-\$210; Emission	W27)-\$255; EX	otic Kea	r Window Delogo	ger(C49)-\$ \$670: Who	1/U, DOOF LO	KKS POWER/	103) 56-
1996 Corsica Series FW	D L4 cyl 2.2	2 liter N	IPFI OHV Gas	s Engin	e(LN2)(8 y	ralve)	
Bore & Stroke 3.5"x3.46"; Tax H				30@4000;	134 cu.in., 2	.2 liter	
Auto. Trans. 3-speed(MX1); EP/			า 183.5" x 68.5" x 5	54.2" 267	72 19.6	14,385	14,885
5-PS 4-dr NB Sedan 5-PS 4-dr NB Sedan			183.5" x 68.5" x 6			13,495	13,995
5-PS 4-dr NB Sedan			183.5" x 68.5" x 5		_	14,495	14,995
	- 140		DE1 0111/0		. // 00\/40		
1996 Corsica Series FW Bore & Stroke 3.504"x3.307", Ta	U V6 CYI 3.	INGES	TELESCOPE TELES	s Engine	9(L0Z)(7Z 4000: 101	valve)	
Auto. Trans. 4-speed(M13); EP/	IX M.P. 29.47, . Mileane Fetir	3MC N.P. nata 21 <i>1</i> 2	155025200, 1010	ine tooffi.	4000, 191 Cu	.III., J. 1 HCG	
5-PS 4-dr NB Sedan			183.5" x 68.5" x 5	54.2" 281	29.47	15,115	15,615
Options Corsica Series: Destinat						rred Equip.	•
(1SA)-std (1SB)-\$165 (1SC)-\$74	5 (1LD69)(1SF	7-\$1225	(1LD69)(1SQ)-\$1	230; Elect	ric Rear Win	dow Defogge	er(C49)-
\$170; Emission (Calif & Mass) (L	.N2 Engine)-\$1	00; Whee	el (14" Styled Ster	el)-\$56; Po	ower Window	s(A31)-\$340)
1996 Corvette Series RV	VD V8 cvl 5	.7 liter	SFI Gas Engi	ine(LT1)	V16 valve	· ·	
Bore & Stroke 4.0x3.48; Tax H.F							
Auto, Trans. 4-speed(M30); EP/				•	•		
2-PS 2-dr Coupe	1YY07		178.5" x 70.7" x 4			37,225	37,790
2-PS 2-dr Convertible	1YY67	96.2	178.5" x 70.7" x 4	47.3" 326	50 51.2	45,060	45,625
1996 Corvette Series RV	VD V8 cvl 5	.7 liter	SFI Gas Engi	ine(I T4)	(16 valve	1	
Bore & Stroke 4.0x3.48; Tax H.F							
Man. Trans. 6-speed(ML9); EPA					,		
2-PS 2-dr Coupe ZR-1	1YZ07	96.2	178.5 x 70.7" x 4				
2-PS 2-dr Convertible ZR-1	14467	96.2"	178.5" x 70.7" x 4	47.3" 326	51.2	N	
Options Corvette Series: Destinti (1SA)-std (1SB)-\$1333 (1SC)-std	on Unarges-\$5	(200; V8 c)	/IO./ Inter SFIGA No. Edition/745\ Fo	s Engine(l 1250: C	.14)-51450; i nd Saw+	reneried Eq	uip. Pkg
gine) (Z16) Coupe-\$3250 Convert							C2-
\$1996; Performance Handling Pi	g(Z07)-\$2045;	Roof Pk	(C2L)-\$950; Roo	of Panel (F	Removable B	lue or Bronz	e Tint
•			46	•			

	_								Page				
				CDC	WORKSH	HEET							
				CODES FO	R OBJECT CO	ONTAC	TED						
(0	1-30) - Vehicle N	Number			(57) Fe							
81.	1	#:=:==				58) W							
		lision				59) B							
	(31)	Overturn —	rollover (exclude	es end-over-			tch or culvert						
		Rollover-er				61) G							
		Fire or explo	sion				re hydrant						
		Jackknife				63) Ci							
	(35)	Other Intrau	nit damage (spe	city):		64) Br							
	1261	Alamantician			(68) Oj	her fixed object	(specify):	$\overline{}$				
	(38)	Noncollision Other nonco	injury Illision (specify):		(1	<u>ن</u> Ur (69	ement in	DEAIN AG	e Pipe				
	(39)	Noncollision	- details unkno)M(D				•					
	,		- dotails dilkiid	*****	Con	ISION W	ith Nonfixed Ot	oject	_				
Co	llisio	n With Fixed	Object		•	70) P8	ssenger car, lig	nt truck, van	, or other				
	411	Tree (< 10 ^	m in diameter)		,-	ve 71\ •	hicle not in-tran	sport	. •				
, i	421	Tree (> 10 c	cm in diameter)			/	edium/heavy tru	ck or bus no	t in-transport				
ì	43)	Shrubbery or	huch				destrian						
		Embankment			(/	(3) Cy	clist or cycle						
	-				(7	(4) Oti	her nonmotorist	or conveyar	nce				
(45)	Breakaway p	ole or post (any	diameter)	(7	'5) Ve	hicle occupant						
			_		(7	'6) An	imal						
NOI	norea	kaway Pole d	or Post			'7) Tra							
(50)	Pole or post	(≤ 10 cm in dian	neter)	(7	'8) Tra	3) Trailer, disconnected in transport						
((> 10 cm but s	30 cm in	(7	'9) Ob	ject fell from ve	hicle in-trans	sport				
,		diameter)			(8	8) Oth	ner nonfixed obj	ect (specify)	:				
(!	52) 53)	Pole or post ((> 30 cm in diar (diameter unkno	meter) wn)	(8	9) <u>Unl</u>	known nonfixed	object					
		Concrete traf		•				•					
		Impact attent			(9	8) Oth	er event (speci	fy):					
(!	56)	Other traffic	barrier (includes	guardrail)	(9	9) Uni	cnown event or	object					
		(specify):											
			DEFORMA	TION CLASS	SIFICATION E	Y EVE	NT NUMBER						
Acci	daas		(4) (0)			(4)	(5)						
Eve			(1) (2) Dispersion	lease-seat	(0)	Speci		(6)					
Sequ		Object	Direction of Force	Incremental Value of	(3)	Longitu		Type of	(7)				
Num		Contacted	(degrees)	Shift	Deformation Location	or Late		Damage	Deformation				
						Locati	on Location	Distribution	Extent				
0	<u>Ļ</u>	68			E	\mathcal{Y}	<u></u>	W					
0	\mathcal{Z}	60			E		, ,						
								$\overline{\mathcal{U}}$					
							-						
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							-	-					
							·						
													

COLLISION DEFORMATION CLASSIFICATION							
HIGHEST	DELTA "V"						
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location-	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. 0 1	5. <u>6</u> 0	6. <u>/</u> Z	7. <u>F</u>	<u>Z</u> .8	9. <u></u>	10. <u>W</u>	11.02
Second Hi	ghest Delta "V	•					
12	13	14	15	16	17	18	19
		CRUS	H PROFILE	IN CENTIMI	ETERS		
	The crush prof	ile for the dam opriate space b	nage described pelow. (ALL M	in the CDC(s) a	above should S ARE IN CEN	be documente TIMETERS.)	d .
HIGHEST [DELTA "V"						
20. L	21. 				C ₅	C ₆	22.
						+ =	
Second Highest Delta "V"							
23. L	24. C ₁			C ₄	C _s	C ₆	25. ±D
						• • •	
(Coded impact (250)	rmed End Width when highest s is an end plane Code to the nea 250 centimeter No highest seve	everity impact.) arest centimete s or more		(650)	Code to the ne centimeter 650 centimeter Unknown	•	244
(999) Unknown 27. Direct Damage Width (For highest severity impact) Code to the nearest centimeter (250) 250 centimeters or more (999) Unknown			29. Original Average Track Width Code to the nearest centimeter (185) 185 centimeters or more (999) Unknown inches X 2.54 =				

		TEERING	RIM/SPOKE DEFO	RMATION	J
		(All A	Aeasurements Are in Centimet	ers)	,
	COMPARISON VALUE	_	DAMAGE VALUE	=	DEFORMATION
1	OP JASINERIA 10	_	5	=	5
F	BoHom	_		=	
Q	1) 510€ (vent) 18		10	=	8
C.	3) " Lighter to 1"	· -) 4	=	3
	* Note: D Shear conta	eforma Caps ct.	ution most sule moveme	t like nt r	ly from not Driver
-	Hub to center Driver seat trac seatback sligh	K fu	U FORNARD	atboek	50cm
D	ash to seath a	cK	75cm		. •
P#	ass seatback 3/6 ass seattenck he	y Recli tween	rned. full forward	d E 90	MID FORWARD
1	hash to cover			·	
	eat aushion to				





Trational Front	20			ata System. Interior Vehicle	1 01111	Page !
	1	POli	T	CUPANT CONTACT		
Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical	Evidence	Confidence Level of Contact Point
A	610	1	(L) Knee	Cupporting 1 mysical	LVIdelice	/ /
В	DID	1	B) Knee		1	'
С	011	Z	HEAD	SKIN TRANS.	Fen	/
D	011	Z	FACE	ul li	•	/
E	001			NON CONTACT I	AIRbag COU	JAN N/
F	170	1	FACE	5KIN/ MUC	,	7
G	180	_2_	Legs Tolso	DIRT DARK	SKIN	
Н	002		,	NON CONTACT	. 139	N/A
i						
J						
K						
L						
M						
N		·	<u> </u>	RIOR COMPONENTS		
FRONT (001) Windshield (002) Mirror (003) Sunvisor (004) Steering wheel rim (005) Steering wheel (combination of codes 004 and 005) (007) Steering column,transmission selector lever, other attachment (008) Cellular telephone or CB radio (009) Add on equipment(e.g., tapedeck, air conditioner) (010) Left instrument panel and below (011) Center instrument panel and below (012) Right instrument panel and below (013) Glove compartment door (014) Knee bolster (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only) (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only) (017) Windshield reinforced by exterior object, (specify):		excludir armrest: (052) Left side (053) Left side (054) Left side (057) Left side (057) Left side (058) Left side including followin sill, A (A or roof s (060) Other left (specify) RIGHT SIDE (101) Right side armrests (102) Right side (104) Right B-(105) Other rig (106) Right side (107) Right side (107) Right side (107) Right side (108) Right side (109) Right	A 1/A2)-pillar illar (specify): window glass window frame window sill window glass one or more of the properties of the side object: is interior surface, ghardware or window glass one or more of the properties of the window glass one or more of the properties of the window glass one or more of the properties of the properties of the properties of the properties of the window glass one or more of the properties of the prop	INTERIOR (151) Seat, back support (152) Belt restraint webbing/buckle (153) Belt restraint B-pillar or door frame attachment point (154) Other restraint system component Ispecifyl: (155) Head restraint system (160) Other occupants (specify): (161) Interior loose objects (162) Child safety seat (specify): (163) Other interior object (specify): AIR BAG (170) Air bag-driver side (175) Air bag compartment cover-driver side (180) Air bag-passenger side (185) Air bag compartment cover-passenger side (190) Other air bag (specify) (195) Other air bag (specify) ROOF (201) Front header (202) Rear header (203) Roof left side rail (204) Roof right side rail (205) Roof or convertible top FLOOR (251) Floor (including toe pan) (252) Floor or console mounted transmission lever, including console (253) Parking brake handle	REAR (301) Backlight (rear window) (302) Backlight storage rack, door, etc. (303) Other rear object (specify): ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT (401) Hand controls for braking/acceleration (402) Steering control devices (attached to OEM steering wheel) (403) Steering knob attached to steering wheel (i.e., reduced diameter) (406) Joy stick steering controls (407) Wheelchair tie-downs (408) Modification to seat belts, (specify): (409) Additional or relocated switches, (specify): (410) Raised roof (411) Wall mounted head rest (used behind wheel chair) (412) Other adaptive device (specify):	
				(254) Foot controls including parking brake	POINT	CONTACT

NASS CDS OCCUPANT INJURY FORM: CASE VEHICLE RIGHT FRONT PASSENGER

BODY DIAGRAMS AND MEDICAL RECORDS FROM INITIAL TREATMENT FACILITY

MISSING DATA

THE FOLLOWING DATA ARE NOT INCLUDED IN THIS CASE:

PAGE I	NUMBER(S)
	<u> </u>
	

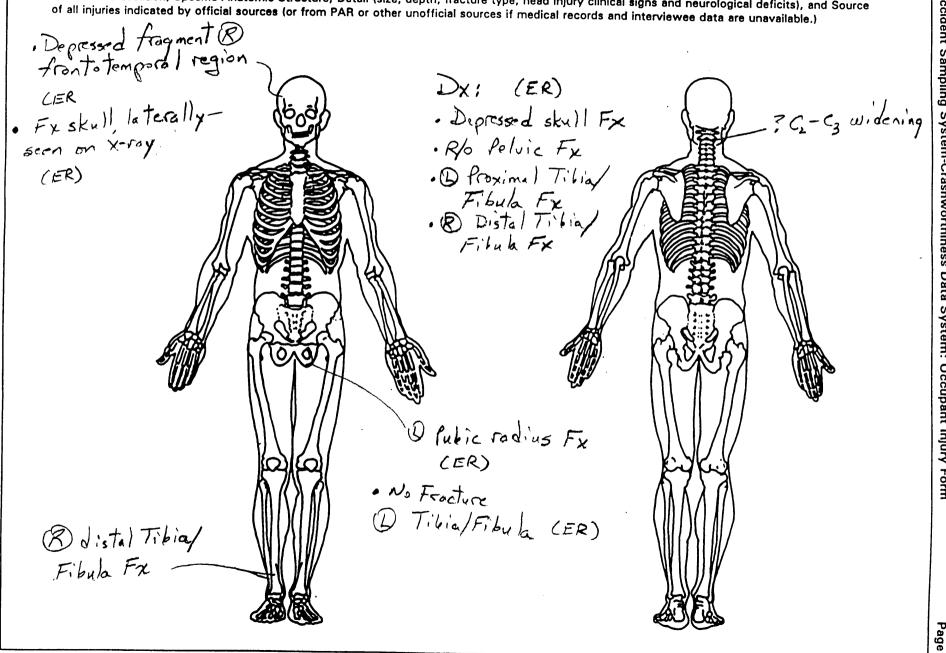
(02) Cervical (04) Thoracic (06) Lumbar

OCCUPANT INJURY CLASSIFICATION Body Region Specific Anatomic Level of Injury **Aspect** Structure Head Specific injuries are (1) Right (2) Face assigned consecutive (2) Left (3)Neck Vessels, Nerves, Organs, two-digit numbers (3) Bilateral (4)Thorax Bones, Joints are assigned beginning with 02. (4) Central (5) Abdomen consecutive two digit (5) Anterior (6)Spine numbers beginning with To the extent possible, (6) Posterior (7)**Upper Extremity** within the organizational (7)Superior (8) **Lower Extremity** framework of the AIS, 00 (8) Inferior (9) Unspecified The exceptions to this rule is assigned to an injury (9) Unknown apply to: NFS as to severity or (0) Whole region where only one injury is Type of Anatomic Whole Area given in the dictionary for Structure (02) Skin - Abrasion that anatomic structure. (04) Skin - Contusion 99 is assigned to any Whole Area (06) Skin - Laceration (1) injury NFS as to lesion or Vessels (2) (08) Skin - Avulsion severity. (10) Amputation (3) Nerves (4)Organs (includes (20) Burn Abbreviated Injury Scale Muscles/ligaments) (30) Crush Skeletal (includes (5) (40) Degloving (1)Minor Injury joints) (50) Injury - NFS (2)Moderate Injury Head - LOC (6) (90) Trauma, other than (3) Serious Injury (9) Skin mechanical (4)Severe Injury (5) Critical Injury Head - LOC (6)Maximum (02) Length of LOC (untreatable) (7) Injured, unknown (O4) Level severity (06) of (08) Consciousness (10) Concussion Spine

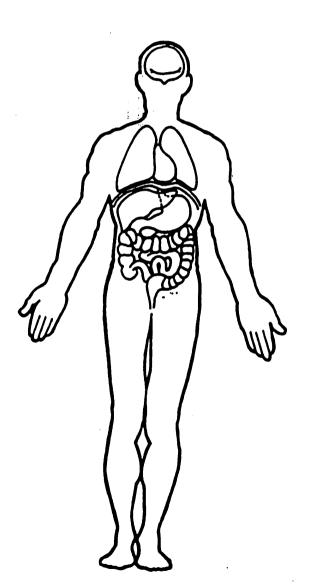
SOURCE OF INJURY DATA	INJURY SOURCE	DIRECT/INDIRECT INJURY
	CONFIDENCE LEVEL	
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic	(1) Certain (2) Probable (3) Possible (9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify): (9) Police		

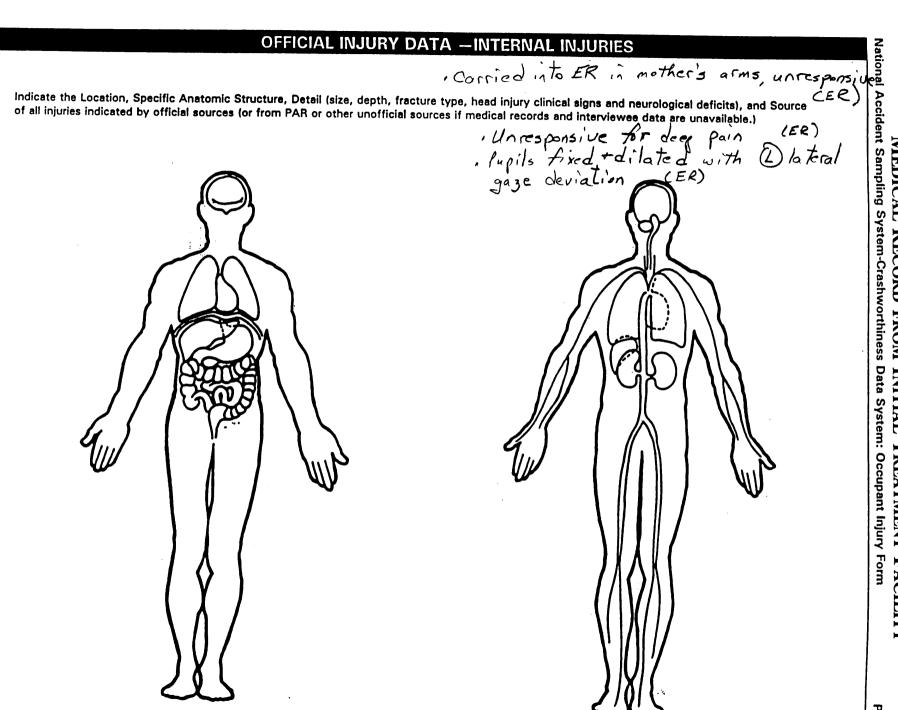
OFFICIAL INJURY DATA - SKELETAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source



				INJURY	SOU	RCES		
Γ	FRON	AT.	(102)	Right side hardware or	/183) Air bag-passenger side and	(411) Wall mounted head rest
		Windshield	(102)	srmrest	1103	object held	((used behind wheel chair)
l		Mirror	(103)	Right A (A1/A2)-pillar	(184) Air bag-passenger side and	(412	Other adaptive device
1	(003	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
1	(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185	Air bag compartment		
ı		Steering wheel hub/spoke				cover-passenger side		
	(006)	Steering wheel (combination		Right side window glass	(186	Air bag compartment		RIOR of OCCUPANT'S
į	(007)	of codes 004 and 005)		Right side window frame		cover-passenger side and	VEHI	
ı	(007)	Steering column, transmission selector lever,		Right side window sill Right side window glass	/187	eyewear Air bag compartment		Hood Outside hardware (e.g.,
f		other attachment	(103)	including one or more of the	(107	cover-passenger side and	14021	outside mirror, antenna)
1	(800)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
		radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
ı	(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		
1		tape deck, air conditioner)	(110)	Other right side object		object held		
ı	(010)	Left instrument panel and		(specify):	(189)	Air bag compartment	(454)	Unknown exterior objects
		below				cover-passenger side and		
	(011)	Center instrument panel and below	MITEO	IOR .	(100)	object in mouth		RIOR OF OTHER MOTOR
١.	10121	Right instrument panel and	INTER	Seat, back support	(190)	Other air bag (specify)	VEHIC	Front bumper
	(0 . 2,	below		Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
١,	(013)	Glove compartment door		Belt restraint B-pillar or door	(1.00)	cover (specify)		Other front of vehicle
١,	(014)	Knee bolster		frame attachment point				(specify):
١	(015)	Windshield including one or	(154)	Other restraint system				
		more of the following: front		component (specify):	ROOF		(504)	Hood
		header, A (A1/A2)-pillar,				Front header		Hood ornament
		instrument panel, mirror, or		Head restraint system		Rear header		Windshield, roof rail, A-pillar
		steering assembly (driver side only)	(160)	Other occupants (specify):		Roof left side rail	(507)	Side surface
١,	(016)	Windshield including one or	(161)	Interior loose objects		Roof right side rail Roof or convertible top		Side mirrors Other side protrusions
Ι'	,	more of the following: front		Child safety seat (specify):	(200)	neor or conventions top	(303)	(specify):
1		header, A (A1/A2)-pillar,			FLOOR	R		
		instrument panel, or mirror	(163)	Other interior object	(251)	Floor (including toe pan)	(510)	Rear surface
l		(passenger side only)		(specify):	(252)	Floor or console mounted	(511)	Undercarriage
(0171	Windshield reinforced by				transmission lever, including		Tires and wheels
		exterior object (specify)	440.04			console	(513)	Other exterior of other motor
١,	A101	Other front object (specify):	AIR BA			Parking brake handle		vehicle (specify):
۱ '	0131	Other from object (specify).		Air bag-driver side Air bag-driver side and	(254)	Foot controls including parking brake	(514)	Unknown exterior of other
			******	evemes.		parking brake	(314)	motor vehicle
ı	EFT S	SIDE	(172)	Air bag-driver side and	REAR			
(051)	Left side interior surface,		jewetry	(301)	Backlight (rear window)	OTHER	VEHICLE OR OBJECT IN
		excluding hardware or	(173)	Air bag-driver side and object	(302)	Backlight storage rack,	THE E	VVIRONMENT
		armrests		held		door, etc.	• •	Ground
(052)	Left side hardware or		Air bag-driver side and object	(303)	Other rear object (specify):	(598)	Other vehicle or object
١,	0531	armrest Left A (A1/A2)-pillar		in mouth Air bag compartment				(specify):
		Left B-piller	(,,,,,	cover-driver side	ADAP	TIVE (ASSISTIVE) DRIVING	15991	Unknown vehicle or object
		Other left pillar (specify):	(176)	Air bag compartment	EQUIP		,5551	OF THE PERSON OF CONTRACT
				cover-driver side and		Hand controls for	NONCO	ONTACT INJURY
0	056)	Left side window glass		eyewear		braking/acceleration		Fire in vehicle
		Left side window frame	(177)	Air bag compartment	(402)	Steering control devices	(602)	Flying glass
		Left side window sill		cover-driver side and jewelry		(attached to OEM steering	(603)	Other noncontact injury
"	U59)	Left side window glass		Air bag compartment		wheel)		source
		including one or more of the following: frame, window		cover-driver side and object held	(403)	Steering knob attached to		(specify):
		sill, A (A1/A2)-pillar, B-pillar,		Air bag compartment	(405)	Steering wheel Replacement steering wheel		Air bag exhaust gases
		or roof side rail.		cover-driver side and object		(i.e., reduced diameter)	(03/1	Injured, unknown source
-	060)	Other left side object		in mouth	(406)	Joy stick steering controls		
		(specify):	(180)	Air bag-passenger side		Wheelchair tie-downs		
				Air bag-passenger side and	(408)	Modification to seat belts,		
,	ICHT.	CIDE		eyewear		(specify):		
	NGHT 1011	Right side interior surface,		Air bag-passenger side and	(409)	Additional or relocated		
,		excluding hardware or	i	jewelry		switches, (specify):		
		armrests			(410)	Raised roof		





Page

		Cause of Death	
		ICD·9·CM	
		,	
:			
		OTHER DRUGS (GV16)	
Speci	men Test Type	Drug(s)	Drug Type
Bk	ood and urine tests		
	ood test only		
	ine test only her test	4	·
Un	specified		
		Medical Record Abbreviations	
Symbol		Record Type Description	
A ME		ation based upon an invasive examination of a body d—where the information reported on the patient is based on a non-invasive exa	mination of the body
AR	Admission record/summs	ry—any medical information on this record should be considered as post-ER sine records are common in short hospitalizations and usually only contain: admiss	ce it summarizes the
700	and a listing of surgical t	reatments; ICD-9-CM codes are frequently available.	
PS	information as discussed		
D6		ten history of a patient's hospitalization highlighting the patient's major injuries ive of its author which in many cases is a consultant	; this record is often
06		ry of a performed surgical operation often providing detailed information about rgery are normally admitted; thus, this record is normally considered post-ER; i	
PX.	results from an outpatien	t surgery, then treat it as emergency-room related ten after the patient has been admitted, or while in surgery or intensive care	
IN	Patient progress notes-su	pplemental record containing additional nurses notes taken after the patient's ac	
н	signed to the patient upor	n—medical history and the results of the physical exam obtained by the emergence a arrival at the emergency room	`
CN		ultations are in essence additional history and physicial exams performed by doc cy room physician; the consultation may occur during the emergency room visit	
ier Ien		where the author of this information is undefined nurse/complaint of section on the emergency room report	
ED		"objective/physical exam" section plus "diagnosis and treatment" sections (i.e., d	octor portion of emer-
NN	Nurse notes-supplements	l record containing additional notes taken by the emergency room nurse(s)	
CV CV	Coroner's verdict-statem	cen during the patients stay in the emergency room ent of cause of death for legal specific regarding injuries; care must be exercised	to ascertain the creden-
CR		er. information based upon a noninvasive examination performed by a person who	is not a doctor but who
KT	has the title of a coroner Emergency medical techni	cian-report by a person who qualifies as an emergency medical services technic	ian (EMS or EMT)
0		ormation based on an other source (e.g., newspaper, DVM-Doctor of Veterinar	

U.S. Department of Transportation

National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

1. O 3. Vehicle Number

2. Case Number - Stratum

9620

4. Occupant Number

02

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				<u> </u>	A.I.S 9	00		_		Injury Source	Direct/	Occupant Area
		Source of Injury	Body	Type of Anatomic	Specific Anatomic	Level of	A.I.S.	Aspest	Injury Source	Confidence Level	Indirect Injury	Intrusion Number
		Data	Region	Structure	Structure	Injury	Severity	Aspect	Jource	Level	піјшу	- Idditioei
Less	of Idaisne	5. <u>2</u>	6	7. <u>6</u>	8. <u>0</u> <u>2</u>	9. <u>/ 4</u>	10. 5	11. 2 12.	01,	13	14	15. 00
Mid hemo	lerain 2000 1 rrhige	6. <u>2</u>	17. <u>/</u>	18. 💆	19. 02	_{20.} <u>/</u> <u>0</u>	21. 5	22. 8 23.	011	.24	25	26. 00
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	dural 4th 3 a toma,	. <u>2</u> B	39. /	40. 4	41.06	42. <u>36</u>	43. 5	44. / 45.	011	46	47	48. 00
	acerebi 5th 4 a Toma		50. /	51. 4	52. <u>0</u> <u>6</u>	53. <u>3</u> 8	54. <u>4</u>	55. 1 56.	011	57	58	59. <u>OO</u>
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cul	raventre er 8th &	i- <u>a</u>	83. <u>/</u>	84. 4	85. <u>0</u> <u>6</u>	86. <u>7</u> <u>8</u>	87. <u>4</u>	88. 9 89.	01	90	91	92. <u>0</u> 0
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HS Form 433B (1/96)

This report is authorized by P.L. 89-563, Title 1, Section 106, 108, and 112. While you are not required to respond, your cooperation is needed to make the results of this data collection effort comprehensive, accurate, and timely.

	٠			OCC	UPANT I	INJURY	DATA	•			•
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
Fracture B 11th Fibula		8	5	16	10	2	<u>/</u>	180	3	1	<u>00</u>
Bacture Brikia	2	8	5	34	14	2	1	180	3	_/	<u>0</u> 0
Fracture Disth Tibia	2	8	5	<u>34</u>	22	3	_2	180	3		<u>00</u>
Abrasion R) 14th Shin	3	_8	9	<u>02</u>	02	_′	1	180	<u>2</u>	1	00
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16th		_								_	
17th								—————			
18th	_		******								
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25th	·								_		

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BODY DIAGRAMS AND MEDICAL RECORDS FROM FACILITY TO WHICH OCCUPANT WAS TRANSFERRED AND HOSPITALIZED

MISSING DATA

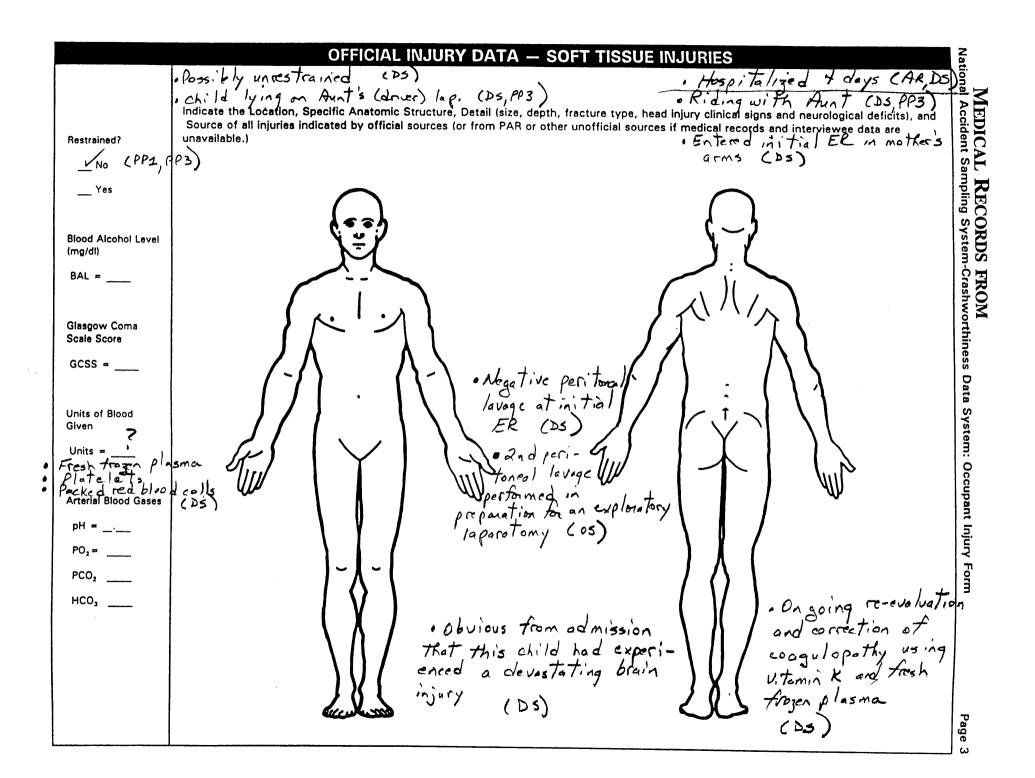
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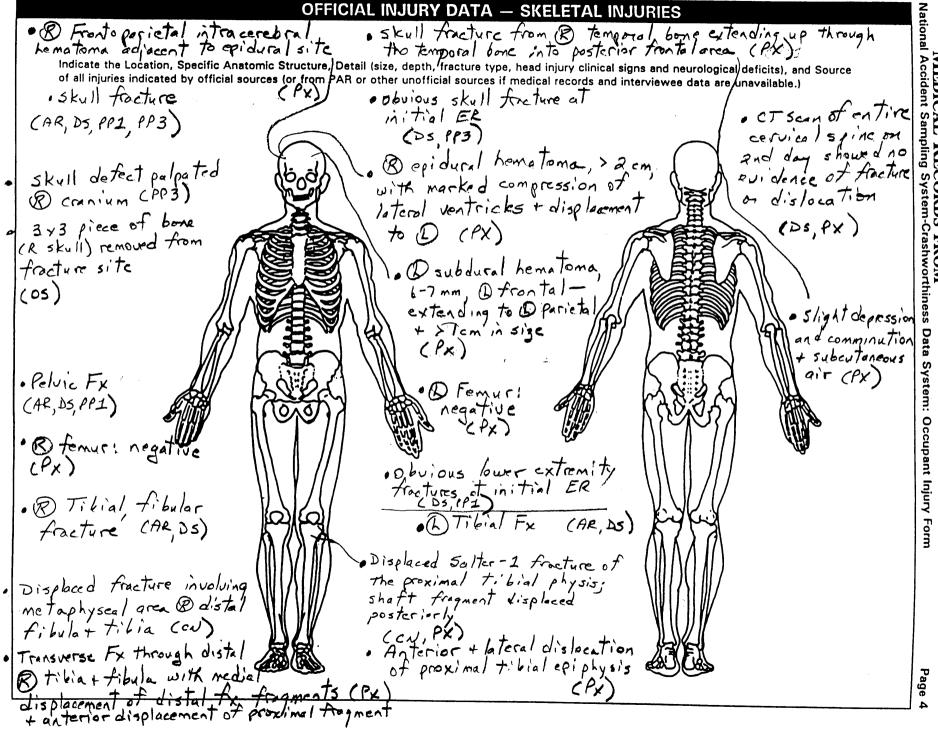
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<u>Spine</u> (02) Cervical (04) Thoracic (06) Lumbar

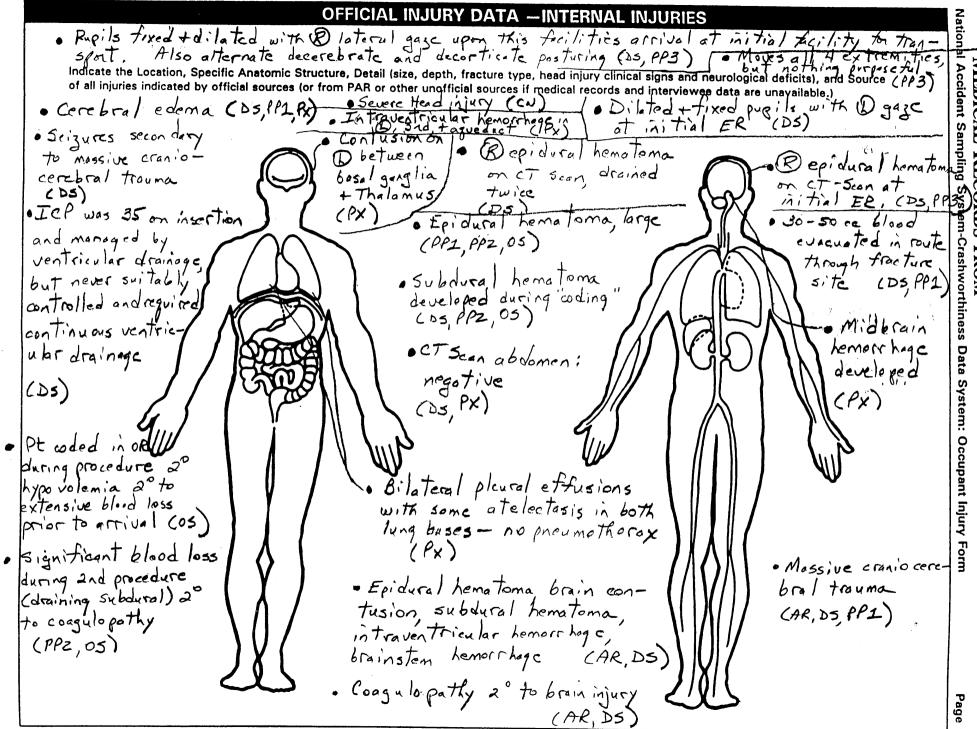
OCCUPANT INJURY CLASSIFICATION Body Region Specific Anatomic Level of Injury Aspect Structure Head Specific injuries are (1) Right Face (2) assigned consecutive (2)Left (3) Neck Vessels, Nerves, Organs. two-digit numbers (3)Bilateral Bones, Joints are assigned (4) Thorax beginning with 02. (4) Central (5) Abdomen consecutive two digit (5) Anterior (6)Spine numbers beginning with To the extent possible, (6)Posterior **Upper Extremity** (7)02. within the organizational (7)Superior (8) **Lower Extremity** framework of the AIS, 00 (8) Inferior (9) Unspecified The exceptions to this rule is assigned to an injury Unknown (9)apply to: NFS as to severity or (O) Whole region where only one injury is Type of Anatomic Whole Area given in the dictionary for Structure (02) Skin - Abrasion that anatomic structure. (04) Skin - Contusion 99 is assigned to any Whole Area (06) Skin - Laceration injury NFS as to lesion or (2)Vessels (08) Skin - Avulsion severity. (3) (10) Amputation Nerves (4)Organs (includes (20)Burn Abbreviated Injury Scale Muscles/ligaments) (30)Crush (5) Skeletal (includes (40) Degloving (1)Minor Injury (50) Injury - NFS ioints) (2)Moderate Injury Head - LOC (6) (90) Trauma, other than (3) Serious Injury (9) Skin mechanical (4) Severe Injury (5) Critical Injury Head - LOC (6)Maximum (02) Length of LOC (untreatable) (7)Injured, unknown (04) Level severity (06) of (08) Consciousness (10) Concussion

SOURCE OF INJURY DATA	INJURY SOURCE CONFIDENCE LEVEL	DIRECT/INDIRECT INJURY
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic	(1) Certain (2) Probable (3) Possible (9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify): (9) Police		





INJURY SOURCES (411) Wall mounted head rest FRONT (102) Right side hardware or (183) Air bag-passenger side and object held (001) Windshield (used behind wheel chair) armrest (412) Other adaptive device (103) Right A (A1/A2)-pillar (184) Air bag-passenger side and (002) Mirror (003) Sunvisor (104) Right B-pillar object in mouth (specify): (105) Other right pillar (specify): (185) Air bag compartment (004) Steering wheel rim (005) Steering wheel hub/spoke cover-passenger side (106) Right side window glass (006) Steering wheel (combination (186) Air bag compartment **EXTERIOR of OCCUPANT'S** of codes 004 and 005) (107) Right side window frame cover-passenger side and VEHICLE (007) Steering column, (108) Right side window sill (451) Hood eyewear transmission selector lever, (452) Outside hardware (e.g., (109) Right side window glass (187) Air bag compartment other attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB following: frame, window jewelry (453) Other exterior surface or radio sill, A (A1/A2)-pillar, B-pillar, (188) Air bag compartment tires (specify): (009) Add on equipment (e.g., or roof side rail. cover-passenger side and tape deck, air conditioner) (110) Other right side object object held (010) Left instrument panel and (specify): (189) Air bag compartment (454) Unknown exterior objects below cover-passenger side and (011) Center instrument panel and object in mouth **EXTERIOR OF OTHER MOTOR** below INTERIOR (190) Other air bag (specify) VEHICLE (O12) Right instrument panel and (151) Seat, back support (501) Front bumper below (152) Belt restraint webbing/buckle (195) Other air bag compartment (502) Hood edge (013) Glove compartment door (153) Belt restraint B-pillar or door cover (specify) (503) Other front of vehicle (014) Knee bolster frame attachment point (specify): (015) Windshield including one or (154) Other restraint system more of the following: front component (specify): (504) Hood header, A (A1/A2)-pillar, (201) Front header (505) Hood ornament instrument panel, mirror, or (155) Head restraint system (202) Rear header (506) Windshield, roof rail, A-pillar steering assembly (driver (160) Other occupants (specify): (203) Roof left side rail (507) Side surface side only) (204) Roof right side rail (508) Side mirrors (016) Windshield including one or (161) Interior loose objects (205) Roof or convertible top (509) Other side protrusions more of the following: front (162) Child safety seat (specify): (specify): header, A (A1/A2)-pillar, FLOOR instrument panel, or mirror (163) Other interior object (251) Floor (including toe pan) (510) Rear surface (passenger side only) (specify): (252) Floor or console mounted (511) Undercarriage (017) Windshield reinforced by transmission lever, including (512) Tires and wheels exterior object (specify) console (513) Other exterior of other motor AIR BAG (253) Parking brake handle vehicle (specify): (019) Other front object (specify): (170) Air bag-driver side (254) Foot controls including (171) Air bag-driver side and (514) Unknown exterior of other parking brake evewear motor vehicle LEFT SIDE (172) Air bag-driver side and REAR (051) Left side interior surface. iewelc (301) Backlight (rear window) OTHER VEHICLE OR OBJECT IN excluding hardware or (173) Air bag-driver side and object (302) Backlight storage rack, THE ENVIRONMENT armrests held door, etc. (551) Ground (052) Left side hardware or (174) Air bag-driver side and object (303) Other rear object (specify): (598) Other vehicle or object in mouth (specify): (053) Left A (A1/A2)-pillar (175) Air bag compartment (054) Left B-pillar cover-driver side **ADAPTIVE (ASSISTIVE) DRIVING** (599) Unknown vehicle or object (055) Other left pillar (specify): (176) Air bag compartment EQUIPMENT cover-driver side and (401) Hand controls for NONCONTACT INJURY (056) Left side window glass evewear braking/acceleration (601) Fire in vehicle (057) Left side window frame (177) Air bag compartment (402) Steering control devices (602) Flying glass (058) Left side window sill cover-driver side and jewelry (attached to OEM steering (603) Other noncontact injury (059) Left side window glass (178) Air bag compartment wheel) source including one or more of the cover-driver side and object (403) Steering knob attached to (specify): following: frame, window held steering wheel (604) Air bag exhaust gases sill, A (A1/A2)-pillar, B-pillar, (179) Air bag compartment (405) Replacement steering wheel (697) Injured, unknown source or roof side rail. cover-driver side and object (i.e., reduced diameter) (060) Other left side object in mouth (406) Joy stick steering controls (specify): (180) Air bag-passenger side (407) Wheelchair tie-downs (181) Air bag-passenger side and (408) Modification to seat belts. eyewear (specify): RIGHT SIDE (182) Air bag-passenger side and Additional or relocated (101) Right side interior surface, jewelry switches, (specify): excluding hardware or armrests (410) Raised roof



CAUSE OF DEATH

Massive craniocerebral trauma due to MUA (AR, DS

ICD-9-CM

803.25 Closed skull tracture with subarachnoid, subdurators
extradural hemographer and prolonged loss of consciousness
> 24 hours without return
808.8 closed pelvic fracture unspecified
823.00 Fracture Tibial Fibula, proximal, closed
823.82 Fracture Tibial Fibula, unspecified, closed, involving fibula with the

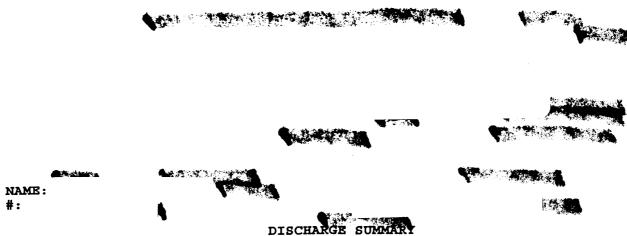
OTHER DRUGS (GV16)

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	Specimen Test Type	Drug(s)	Drug Type	
	Blood and urine tests Blood test only Urine test only Other test Unspecified	276.5 Disorder Huid, electrolyte, acid-base 285.1 Acute posthemorrhagic anemia 286.9 Coaquilation defect, other or unsp Procedures		volume deplotion
ı	96.04 Insection	of adotrachael tube Ton and cleanings	fibula	

MEDICAL RECORD ABBREVIATIONS

Symbol **Record Type Description** Autopsy-medical information based upon an invasive examination of a body Medical examiner's record-where the information reported on the patient is based on a non-invasive examination of the body ME Admission record/summary-any medical information on this record should be considered as post-ER since it summarizes the AR patient's admission; these records are common in short hospitalizations and usually only contain: admission DX(s), final DX(s), and a listing of surgical treatments; ICD-9-CM codes are frequently available. Admission/discharge face sheet-face sheets are essentially the same as admission record/summaries and contain the same types of FS information as discussed above Discharge summary-shorten history of a patient's hospitalization highlighting the patient's major injuries; this record is often D6 written from the perspective of its author which in many cases is a consultant Operative record—summary of a performed surgical operation often providing detailed information about a specific trauma; patients who survive the surgery are normally admitted; thus, this record is normally considered post-ER; however, if this record results from an outpatient surgery, then treat it as emergency-room related Radiographic records-taken after the patient has been admitted, or while in surgery or intensive care Patient progress notes-supplemental record containing additional nurses notes taken after the patient's admission IN History and physical exam-medical history and the results of the physical exam obtained by the emergency room physician assigned to the patient upon arrival at the emergency room Consultation record-consultations are in essence additional history and physicial exams performed by doctors whose expertise was CN requested by the emergency room physician; the consultation may occur during the emergency room visit or after admission Emergency room report-where the author of this information is undefined KR Emergency room nurse-"nurse/complaint of" section on the emergency room report Emergency room doctor-"objective/physical exam" section plus "diagnosis and treatment" sections (i.e., doctor portion of emergency room report) NN Nurse notes—supplemental record containing additional notes taken by the emergency room nurse(s) Radiographic records-taken during the patients stay in the emergency room Coroner's verdict-statement of cause of death for legal specific regarding injuries; care must be exercised to ascertain the credentials of the verdict's author. Coroner's report-medical information based upon a noninvasive examination performed by a person who is not a doctor but who has the title of a coroner Emergency medical technician-report by a person who qualifies as an emergency medical services technician (EMS or EMT) Other source-medical information based on an other source (e.g., newspaper, DVM-Doctor of Veterinary Medicine) PP = Physician Progress Notes

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FINAL DIAGNOSES:

Motor vehicle accident, passenger, with massive craniccerebral trauma, including skull fracture, epidural hematoma, subdural hematoma, brain contusion, intraventricular hemorrhage, brain stem hemorrhage, and cerebral edema.

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Consumptive coage. La constitute to brain injury. Bilateral tibial fractures and right la fractu 3.

4.

Pelvic fracture.

CONSULTANTS: Dr. orthopedics, Dr.

III--neurosurgery, Dr.

-trauma surgery.

REFERRING PHYSICIAN: Dr.

County in

of

HISTORY OF PRESENT ILLNESS: The patient is a year-old girl referred from because of multiple trauma. As best can be determined, details of the accident are as follows: The child was riding in the front seat, possibly unrestrained with her aunt. Apparently the child fell asleep and as she slumped over toward the aunt's lap, the aunt attempted to straighten the child, at which time she lost control of the vehicle, with it striking a culvert at approximately fifty-miles-per-hour and coming to an immediate stop. Other scene details are unknown. The child was carried to Hospital Emergency Room by the family and entered the emergency room in revealed obvious skull mother's arms. Initial examination by Dr. fracture, dilated and fixed pupils with a Teft gaze, and obvious lower extremity fractures. The cervical spine was immobilized and the child was intubated. Further evaluation revealed a negative peritoneal lavage, and on CT scan of the brain a right-sided epidural hematoma. We were notified by Dr. and offered provide transport. We recommended Mannitol and loading with Dilantin. Upon our arrival to the Emergency Room Emergency Room, the child was with a stable airway (endotrachear cube), dilated and fixed pupils with a right gaze at this time, and alternate decerebrate and decorticate posturing. The child was quickly loaded and transport initiated. here notified of the incoming patient. The trauma team and Dr. transit, the child became bradycardia, presumably secondary to increasing mass effect on the brain. The epidural hematoma was partially evacuated of 30-50







NAME: #:



DISCHARGE SUMMARY - CONTINUED PAGE 2

cc bright red blood by placing an intravenous catheter through the fracture line for drainage.

Upon arrival to the directly to CT, then immediately to the operating room by Dr. And Dr. anesthesia). CT confirmed the epidural. The calvarium was quickly entered by Dr. for drainage, after which time; however, the child arrested with a subsequent fifteen minute loss of sinus rhythm and CPR. After resuscitation, Dr. again evacuated further brain hematoma. The child was administered fresh frozen plasma, platelets, and packed red blood cells during the procedure. After emergency surgery, the child was again evaluated for possible occult abdominal trauma with a negative.

The child was then admitted to the Pediatric Intensive Care Unit.

PAST MEDICAL HISTORY: Sketchy upon admission. Was essentially unremarkable for significant medical diseases in this child.

FAMILY HISTORY ficant family history was the fact that this child had a sister die as when that child overturned a table, crushing her head in a laundration.

That child was hospitalized in an Intensive Care Unit prior to death.

SUMMARY OF HOSPITAL COURSE: The child was admitted to the Pediatric Intensive Care Unit. Therapy was maintained in hard cervical collar for C-spine immobilization. CT scan of the entire cervical spine on the second hospital day showed no evidence of fracture or dislocation. The child was maintained on mechanical ventilation. Seizures were treated with Ativan and Dilater Cerebral perfusion was maintained by assuring mean arterial pressures at Teast 60 using dopamine and phenylephrine drips as required. There was ongoing reevaluation and correction of coagulopathy using vitamin Keand fresh frozen plasma as needed. Stress ulcer prophylaxis was provided with Pepciatric jejunal tube was placed and early enteral feedings begun. On the second hospital day, a Camino intraventricular monitor and drainage system was placed. ICP was 35 upon insertion and this was managed by ventricular drainage, and eventually barbiturate coma. In spite of these measures, ICP was never suitably controlled and required continuous ventricular drainage.

It was obvious from admission that this child had experienced a devastating brain injury. Frank and detailed discussions were held with the family from the onset with the information given that the child would probably have severe

D Chart Copy



NAMEA

Page 3

DISCHARGE SUMMARY - CONTINUED PAGE 3

brain damage and very possibly a persistent vegetative state, should she survive. All therapies were discussed from the onset, including the option of withdrawing therapy. Initially the family coted for full aggressive therapies. By the third day it became apparent that child may possibly need draining another accumulated subdural hematoma. At this time; however, the family opted against further surgical intervention.

In summary, this was a -year-old girl who experienced massive craniocerebral trauma from a motor vehicle accident, leading to her death

M.D.

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NAME; #: ROOM:

ADMIT DATE: CONSULT DATE:

CONSULTATION

REFERRING: CONSULTING:

CHIEF COMPLAINT:

Multiple trauma with head injury and fractures of both lower extremities.

HISTORY OF PRESENT ILLNESS:

This is a -vear-child who was involved in a motor vehicle accident on the evening to the extremities. She was brought to the Medical Center and underwent emergency to the prognosis for recovery of brain function is poor. I have been asked to see her in regard to the injuries to the lower extremities.

Examination at this time reveal splints applied to both legs, these are removed and she has some deformity noted in the supramalleolar area of the right distal tibia. In addition there is a posterior angulation of the left proximal tibia at the knee joint but circulation in both lower extremities appears to be intact. The x-rays were reviewed and on the left side she has a displaced Salter-1 fracture on the proximal tibial physis. The shaft fragment is displaced posteriorly. The remainder of the extremity appears to intact. The x-ray of the right leg reveals a displaced fracture involved the metaphyseal area of the right distal fibula and tibia.

IMPRESSION:

- Salter-1 displaced fracture of the left proximal tibial epiphysis.
- 2. Displaced fracture of the right distal tibia and fibula.

DISPOSITION:

Under no sedation because of her head injury I was able to reduce both legs. Close reduction of the tibial epiphysis was carried out with the leg flexed and with the anterior pressure applied to the distal fragment. I applied a long leg cast with the knee flexed about 80 degrees. Then closed reduction on the right tibial and fibula fracture was carried out and a short leg cast was applied to the right leg. The x-rays have been reviewed post reduction. She has also an anatomical reduction on the left proximal tibial epiphysis with only about 10% offset. I believe this is acceptable at this time but we will need followup radiographic evaluation. In respect to the right leg she has satisfactory alignment in the AP and lateral plane but there is a few

D





CONSULTATION - CONTINUED PAGE 2

millimeter shortening of the fragment. Once again this followed up with radiographic evaluation.

I plan to re-x-ray the leg in several days and make further recommendations at that time depending on her overall condition.

M.D.

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HISTORY-PHYSICAL-PROGRESS-NURSING-OTHER -(CIRCLE ONE)

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	MR · CPI
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	FIN. CLASS 2.41T TATE - 96



OPERATION:

Emergent evacuation of epidural hematoma secondary to large right frontoparietal hematoma.

COMPLICATIONS:

The patient coded during the procedure secondary to hypothema secondary to extensive blood loss prior to arrival. Blood given, blood pressure reestablished, and then a subdural hematoma formed during coding procedure secondary to a coagulopathy and low hemoglobin.

PROCEDURE:

The patient was taken to the operating room. She was placed under general endotracheal anesthesia emergently. She was prepped and draped in standard neurosurgical fashion. A vertical incision was made from above her ear approximately three-quarters of the way to her vertex. Retractors were placed and hemostasis was obtained in the skin. A single bur hole was placed right in the fracture site and a #3 was placed under the fractured bone and a 3×3 piece of fractured bone was removed using the fracture sites as the edges. A large epidural hematoma was identified and evacuated. At this point the patient's blood pressure dropped acutely after lowering of the intracranial pressure and the patient went into asystole. CPR was performed. The wound was emergently closed with staples. CPR was performed and after significant effort blood pressure was reestablished. The wound was reprepped and draped and reopened. At this time it was noted that the dura was tense and not lax as it had been prior to the epidural evacuation. The dura was opened and a large amount of watery blood came from within the wound. There was some difficulty obtaining hemostasis from the subdural hematoma secondary to coagulopathy. A partial right temporal lobectomy was performed to give room for additional edema. Once the epidural bleeding was completely stopped and the subdural bleeding was completely stopped, a loose dural suture was placed to give a place for drainage. The bone flap was laid back in place and not secured, and a subgaleal drain was placed in the epidural space and placed to a grenade suction brought out through a separate stab incision. There were no surgical complications of the procedure, but there were significant difficulties due to the preexisting coagulopathy and hypovolemia of the patient. A second peritoneal lavage was performed by the surgery team who are now going to perform an exploratory laparotomy to ensure there is no additional blood loss in the abdomen. The patient is in critical condition at this time.

M.D.

D: 96 T: 96 4:00 P

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REO#:



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02:31 PM

ACCT#1 MED REC#:

DOB: 91 SERV:

MD: DX: MVA/MULTIPLE TRAUMA

CONSULTING MD: CONSULTING MD: CONSULTING MD:

ORDER: (00000) C.T. SCAN OF-BRAIN 1.01

RADIOLOGIST:

DATE OF EXAM: 96

CT BRAIN WITHOUT CONTRAST AT ABOUT 9:50 P.M.

THE PATIENT HAS AN EPIDURAL HEMATOMA OVER THE RIGHT FRONTOTEMPOROPARIETAL AREA. IT MEASURES IN EXCESS OF 2CM IN GREATEST WIDTH. THERE IS MARKED COMPRESSION OF THE LATERAL VENTRICLES AND DISPLACEMENT TO THE LEFT. THERE IS NO HYDROCEPHALUS. THERE IS AN INTRACRANIAL PRESSURE MONITOR IN THE RIGHT FRONTAL AREA JUST ANTERIOR TO THE HEMATOMA. THERE IS A SKULL FRACTURE ON THE RIGHT EXTENDING UP THROUGH THE TEMPORAL BONE AND INTO THE POSTERIOR FRONTAL AREA. THERE IS A SLIGHT DEGREE OF DEPRESSION AND COMMINUTION. THERE IS SOME SUBCUTANEOUS AIR. THERE IS A FOCAL CONTUSIONAL TYPE HEMORRHAGE ON THE LEFT.

IMPRESSION:

- 1. LARGE RIGHT SIDED EPIDURAL HEMATOMA WITH SKULL FRACTURE.
- 2. SMALL CONTUSIONAL HEMORRHAGE IN THE LEFT INTERNAL CAPSULE-THALAMIC REGION.

STENO: SH





AGE 001

02:30 85

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ACCIT#: MED REC 91 SERV: 0081 FICU

MD: ADM:

DX: MVH7MULTIFLE TRAUMA

COMSULTING MD:

VERIFIED RADIOLOGY RESULTS _______

REO#:

CONSULTING MD: CONSULTING MD:

ORDER: (00000) C.T. SCAN OF-BRAIN ABD/PELVIS

RADIOLOGIST:

DATE OF EXAM:

CT SCAN OF THE BRAIN AT 12:49 A.M.

THE EPIDURAL HEMATOMA HAS BEEN EVACUATED. THERE IS MINIMAL RESIDUAL BLOOD. THERE IS AN EFIDURAL DRAIN ON THE RIGHT. THE VENTRICLES HAVE RETURNED TO A MIDLINE FOSITION. HOWEVER NEW FINDINGS NOW VISIBLE INCLUDE A 6 OR 7MM LEFT FRONTAL SUBDURAL HEMATOMA. IN ADDITION THE CONTUSIONAL TYPE HEMORRHAGE IN THE INTERNAL CAPSULE-THALAMIC REGION ON THE LEFT IS SLIGHTLY LARGER. THERE IS STILL NO HYDROCEPHALUS. THE VENTRICLES ARE MIDLINE IN POSITION.

IMPRESSION:

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- 1. ESSENTIALLY COMPLETE EVACUATION OF THE RIGHT EPIDURAL HEMATOMA HAS OCCURRED.
- 2. A LEFT FRONTAL SUBDURAL HEMATOMA IS NOW VISIBLE.
- 3. THE CONTUSIONAL HEMORRHAGE IN THE LEFT BASAL GANGLIA AREA IS SOMEWHAT LARGER AND THERE ARE SOME SCATTERED ADDITIONAL PUNCTATE AREAS OF PROBABLE CONTUSIONAL HEMORRHAGE INCLUDING IN THE RIGHT TEMPORAL AREA NOW VISIBLE.

CT SCAN OF THE ABDOMEN AND PELVIS

THE PATIENT HAS A MODERATE AMOUNT OF FREE FLUID WITHIN THE ABDOMEN. I BF: IEVE THIS IS RELATED TO PERITONEAL LAVAGE. THE LIVER, SPLEEN, PANCREAS AND KIDNEYS APPEAR TO BE INTACT. THERE IS AN NG TUBE PRESENT. THERE IS SOME ATELECTASIS AT THE LUNG BASES WITH BILATERAL PLEURAL FLUID. THERE IS ALSO FREE FLUID WITHIN THE PELVIS. THERE IS A LEFT FEMORAL VEIN CATHETER PRESENT.

IMPRESSION: NO SIGNIFICANT ABDOMINAL ABNORMALITY SEEN. FLUID IS THOUGHT SECONDARY TO PERITONEAL LAVAGE. THERE ARE BILATERAL PLEURAL EFFUSIONS WITH SOME ATELECTASIS IN BOTH LUNG BASES. NO FNEUMOTHORAX IS 03:02 PM

ACCT#:

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ADM:

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VERIFIED RADIOLOGY RESULTS

DX: MVA/MULTIPLE TRAUMA VER
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ORDER: (00354) CHEST PORTABLE 71010 31.

RADIOLOGIST:

DATE OF EXAM: 96

3:30 AM

THE PATIENT HAS SOME CONSOLIDATION IN THE RIGHT MID LUNG ZONE PROBABLY IN THE LOWER LOBE. BILATERAL PLEURAL FLUID IS PRESENT AS SEEN ON THE PREVIOUS CT SCAN. A FLEXIFLO FEEDING TUBE IS PRESENT WITH THE TIP INTO THE DUODENUM. THE ET TUBE IS IN GOOD POSITION. THE RIGHT SUBCLAVIAN LINE IS IN THE PROXIMAL SUPERIOR VENA CAVA. THERE IS NO PNEUMOTHORAX SEEN. THERE ARE NO PREVIOUS CHEST FILMS FOR COMPARISON.

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63.01

03:02 PM

ACCT#1 203:

91 SERV:

MD:

ADM:

MED REC#

DX: MVA/MULTIPLE TRAUMA

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ORDER: (00280) SPINE LAT CERVICAL 72020

RADIOLOGIST: MD

DATE OF EXAM: 96

C1 THROUGH T1 APPEAR NORMALLY ALIGNED. THE ET TUBE AND NO TUBE ARE SEEN IN THE ANTERIOR SOFT TISSUE AREA. THE RIGHT FRONTOTEMPORAL SKULL IS BARELY VISUALIZED. THIS IS BFTTER SEEN ON PREVIOUS CT SCANS.

VERIFIED RADIOLOGY RESULTS

03:02 PM

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MD: ADM: 96

DX MUA XXII TIFLE TRAUMA

CONSULTING MD: CONSULTING MD: CONSULTING MD: CONSULTING MD:

ORDER: (00000) C.T. SCAN OF-BRAIN 48.01

RADIOLOGIST:

DATE OF EXAM: \$6

T

9:00 AM

COMPARED TO THE FREVIOUS STUDY THE PATIENT NOW HAS DEVELOPED A LARGE RIGHT FRONTOPARIETAL INTRACEREBRAL HEMATOMA ADJACENT TO THE AREA OF THE EPIDURAL HEMATOMA. THE LEFT SUBDURAL HEMATOMA HAS EXTENDED POSTERIORLY SOMEWHAT OVER THE PARIETAL CONVEXITY AND MEASURES AN EXCESSIVE CENTIMETER IN WIDTH. IN ADDITION, A SMALL AMOUNT OF BLOOD IS NOW VISIBLE IN THE ATRIA AND OCCIPITAL HORNS OF BOTH VENTRICLES AND THERE IS A MID INE HEMORRHAGE WITHIN THE MID BRAIN AS WELL. THE LEFT TEMPORAL CONTUSIONAL HEMORRHAGE IS APPROXIMATELY THE SAME. THE VENTRICLES HAVE INCREASED IN SIZE AND ARE NOW BORDERLINE ENLARGED.

IMPRESSION: NEW AREAS OF HEMORRHAGE ARE IDENTIFIED AS DESCRIBED.

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p. 5

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MD:

ADM:

DX: MVA/MULTIPLE TRAUMA

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REO#:

ORDER: (00000) C.T. SCAN OF-C-SPINE

RADIOLOGIST:

76 DATE OF EXAM:

CT SCAN OF THE CERVICAL SPINE FROM C1 TO T1 AT 3 MM INTERVALS:

THE CERVICAL ALIGNMENT IS NORMAL. NO FRACTURES OR SUBLUXATIONS ARE SUGGESTED.

ON THE LOWER MOST IMAGES THROUGH THE LUNG APICES THERE ARE SOME FOCAL ILL DEFINED DENSITIES PROBABLY REPRESENTING EITHER CONTUSION OR ATFLECTASIS.

IMPRESSION: NEGATIVE CT OF THE CERVICAL SPINE.

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02:22 FM (16 1 MED REC#: ACCT# 91 SEBV: PICU 008: 94 ADM: MD: DX: MVA/MULTIPLE TRAUMA VERIFIED RADIOLOGY RESULTS TO LEAD OF THE PARTY OF THE PAR CONSULTING MD: CONSULTING MD; CONSULTING MD: ORDER: (00454) TIBIA RT PORTABLE 73590 93.01 V A TO THE REAL PROPERTY. RADIOLOGIST: --------96 DATE OF EXAM:

THERE IS NOTED TO BE A TRANSVERSE FRACTURE THROUGH THE DISTAL ASPECT OF THE TIBIA AND FIBULA WITH MEDIAL DISPLACEMENT OF THE DISTAL FRACTURE FRAGMENTS.

02:22 PM

DX: MVA/MULTIPLE TRAUMA

ACCT# 0084

MD:

ADM:

VERIFIED RADIOLOGY RESULTS

CONSULTING MD: CONSULTING MD: CONSULTING MD:

ORDER: (00452) TIBIA LT PORTABLE 73590 92.01

RADIOLOGIST:

DATE OF EXAM: 96

THERE IS NOTED TO BE ANTERIOR AND LATERAL DISLOCATION OF THE PROXIMAL TIBIAL EPIPHYSIS.

03:58 FM

TACCT#

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008:

31 SEXV:

MD:

ADM:

DX: MVA/MULTIPLE TRAUMA

VERIFIED RADIOLOGY "RESULTS

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ORDER: (00368) FEMUR LT PORTABLE 73550

RADIOLOGIST:

DATE OF EXAM: 96

ROUTINE VIEWS FAIL TO REVEAL EVIDENCE OF FRACTURE, DISLOCATION, INFECTION OR NEOPLASM OF THE VISUALIZED OSSEOUS STRUCTURES.

IMPRESSION: NORMAL LEFT FEMUR.

03:58 PM

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MED RE

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91 SERV:

MD:

ADM:

VERIFIED RADIOLOGY RESULTS

DX: MVA/MULTIPLE TRAUMA

CONSIDERATE CONSULTING MD: CONSULTING MD: CONSULTING MD:

ORDER: (00370) FEMUR RT PORTABLE 73550 95.01

RADIOLOGIST:

______ ______ 96

DATE OF EXAM:

ROUTINE VIEWS FAIL TO REVEAL EVIDENCE OF FRACTURE, DISLOCATION, INFECTION OR NEOPLASM OF THE VISUALIZED OSSEOUS STRUCTURES.

IMPRESSION: NORMAL RIGHT FEMUR.

STENO:

LASTPAGE

RESULTS

07:03 PM

F ACCT# MED REES#

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ADM: MD:

DX: MVAZMULTIPLE TRAUMA

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ORDER: (00000) C.T. SCAN DE-BRAIN 131.01

RADIOLOGIST:

CONSULTING MD: CONSULTING MD:

DATE OF EXAM: 96

NONCONTRAST AXIAL IMAGES WERE OBTAINED. THE EXAMINATION SHOWS RIGHT FRONTAL AND RIGHT TEMPOROPARIETAL HEMORRHAGES WITH MILD TO MODERATE MASS EFFECT. THERE IS A LEFT SIDED SUBDURAL OR EPIDURAL HEMORRHAGE WITH MILD MASS EFFECT. I SUSPECT THAT MUCH OF THIS IS SUBDURAL. THIS PASSES OVER THE LEFT PARIETAL AND LEFT FRONTAL REGION. THERE IS A LEFT FRONTAL INTRAVENTRICULAR DRAIN THAT HAS BEEN PLACED. THE VENTRICULAR SIZE IS SLIGHTLY SMALLER NOW THAN BEFORE. THERE IS SOME INTRAVENTRICULAR HEMORRHAGE. THERE IS MODERATE MASS EFFECT IN THE LEFT HEMISPHERE. THERE IS A HEMORRHAGE IN THE LEFT BASAL GANGLIA IN THE MEDIAL TEMPORAL REGION. THERE IS BLOOD IN THE THIRD VENTRICLE AND CEMEBRAL ADULDUCT. FLUID IS SEEN IN THE SPHENOID SINUS.

IMPRESSION: INTERVAL PLACEMENT OF A LEFT FRONTAL INTRAVENTRICULAR DRAIN OR INTRACRANIAL PRESSURE MONITOR. THE VENTRICULAR SIZE HAS DIMINISHED SLIGHTLY SINCE THE PREVIOUS EXAM. AGAIN NOTED ARE THE MULTIPLE HEMORRHAGES.

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ACCT#:

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ADM:

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DX: MVA/MULTIPLE TRAUMA

VERIFIED RADIOLOGY RESULTS

CONSULTING MD:
COMSULTING MD:
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ORDER: (00454) TIBIA RT PORTABLE 73590 152.01

RADIOLOGIST:

DATE OF EXAM: 96

5:30 PM

THE PREVIOUS FILM IS NOT AVAILABLE AT THIS TIME. THERE ARE TRANSVERSE FRACTURES OF THE DISTAL TIBIA AND FIBULA WITH ANTERIOR DISPLACEMENT OF THE PROXIMAL FRAGMENT. THERE IS OVERRIDING AT THE FRACTURE SITE. A CAST IS IN PLACE.

STENO:

03:01 PM MED RECH ACCT# 91 SERV: 203: ADM: MD: DX: MVA/MULTIPLE TRAUMA VERIFIED RADIOLOGY RESULTS ______ CONTINE CONSULTING MD: COMSULTING MD: CONSULTING MD: ORDER: (00402) KNEE LT PORTABLE 73560 151.01 RADIOLOGIST: ___________________ DATE OF EXAM:____

PORTABLE AP AND LATERAL VIEWS SHOW A SALTER I TYPE FRACTURE OF THE PROXIMAL TIBIAL EPIPHYSIS WITH DISRUPTION OF THE EPIPHYSEAL PLATE. THERE MAY BE A MINIMAL BUCKLE FRACTURE OF THE PROXIMAL FIBULA. THE TIBIAL EPIPHYSIS APPEARS SLIGHTLY ANTERIORLY POSITIONED IN RELATIONSHIP TO THE TIBIAL METAPHYSIS ON THESE TWO VIEWS. THE PREVIOUS FILMS ARE NOT AVAILABLE.

STENO:

p. 13

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PF 001 88 SERVED REPORTED RESULTS

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ORDER: (U000D) C.T. SCAN OF-BRAIN 198.UI

RADIOLOGIST:

DATE OF EXAM: 96%

MULTIPLE 10 NM SCICES HERE OBTAINED FROM THE SKULL BASE TO THE VERTEX.
IN THE AXIAL PROJECTION WITHOUT CONTRAST. TODAYS STUDY IS COMPARED TO
THE PREVIOUS STUDY OF 76 AND THERE HAS BEEN LITTLE IF ANY
SIGNIFICANT CHANGE. THERE IS AGAIN NOTED TO BE AN INTRAVENTRICULAR
DRAIN. THERE CONTINUES TO BE SOME INTRAVENTRICULAR HEMORRHAGE AS WELL AS A HEMATOMA OF THE LEFT BASAL CANGLIA AND ALSO A HEMORRHAGE IN THE RIGHT TEMPOROPARIETAL AREA THERE ALSO CONTINUES TO BE A MEET SIDED SUBDURAL -EPIDURAL HEMORRHAGE. THE BASILAR CISTERNS ARE NOT IDENTIFIED. THERE IS A MODERATE AMOUNT OF EDEMA.

IMPRESSION: HEMORRHAGES AS DISCUSSED ABOVE WITH A LEFT VENTRICULAR PRAIN AND A MARKED AMOUNT OF EDEMA AND PROBABLY HERNIATION. NO SIGNIFICANT CHANGE SINCE 96.

STENDA

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